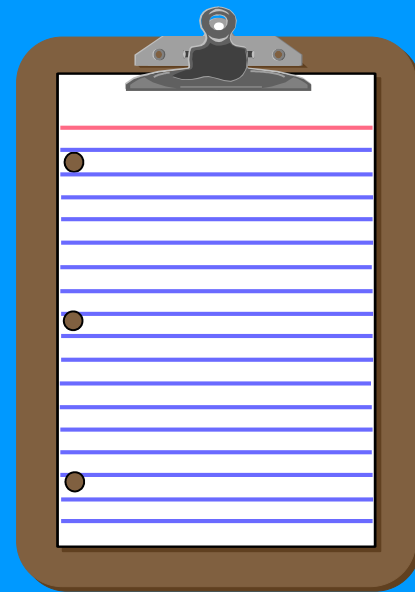
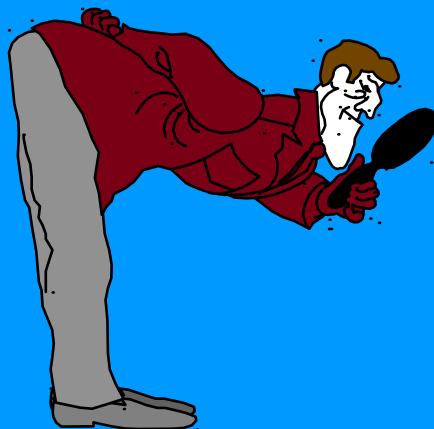


# **ACCIDENT INVESTIGATION AND REPORTING CLASS**





## CLASS SEQUENCE

**PART I - INTRODUCTION**

**PART II - BASIC INFORMATION**

**PART III - CIVILIAN EMPLOYEE INJURY/ILLNESS  
REPORTING**

**PART IV - ACCIDENT INVESTIGATION**

**PART V - MILITARY ACCIDENT REPORTING**

**PART VI - DA FORM 285-AB**



## PART I

# INTRODUCTION



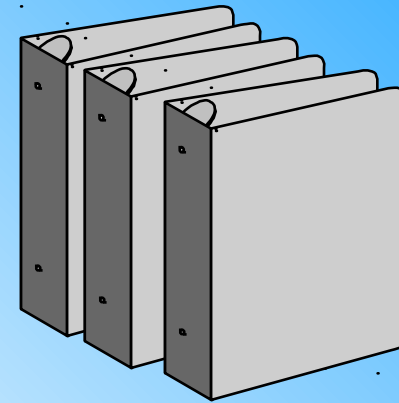
## PURPOSES OF THE CLASS

- TRAIN ON ACCIDENT INVESTIGATION METHODS AND PROCEDURES
- TRAIN ON USE AND COMPLETION OF ACCIDENT REPORTS



## REFERENCES

- ◆ AR 385-40, ACCIDENT REPORTING AND RECORDS
- ◆ DA PAM 385-40, ARMY ACCIDENT INVESTIGATION AND REPORTING
- ◆ USASC STUDENT HANDOUT - AGAR - ABBREVIATED GROUND ACCIDENT REPORT
- ◆ TRADOC REG 385-2, TRADOC SAFETY PROGRAM
- ◆ FLW REG 385-6, SAFETY PROGRAM
- ◆ FLW REG 210-14, RANGES AND TRAINING AREAS



***SEE HANDOUT #1***

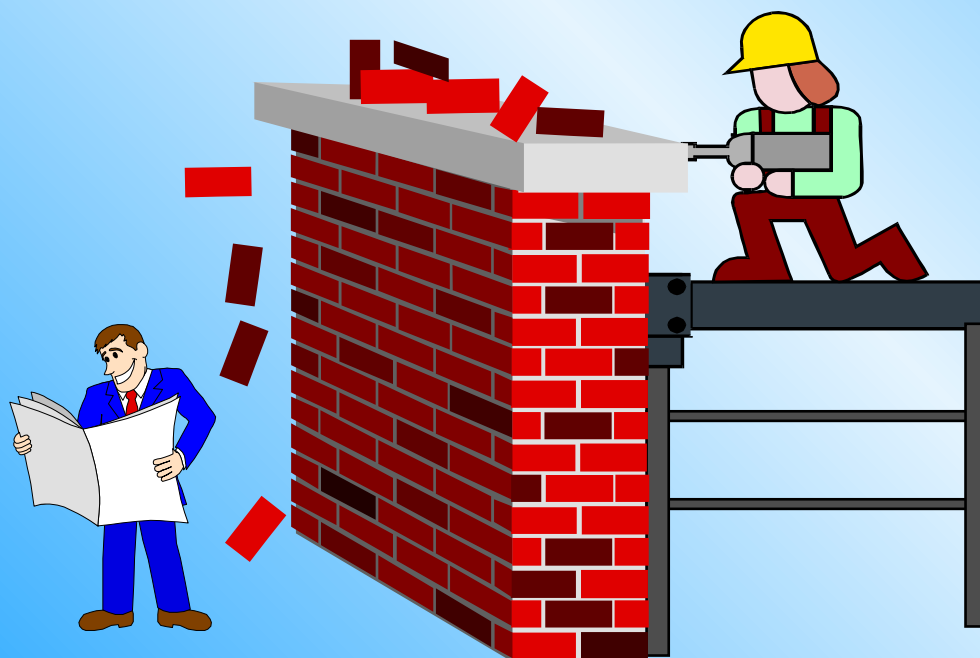


## AR 385-40

▮ **DEFINITION OF AN ARMY ACCIDENT**

▮ **NEAR MISSES**

***SEE  
HANDOUT  
#2***





### AR 385-40 (SLIDE 2)

#### →REPORTS:

**LIMITED USE SAFETY ACCIDENT INVESTIGATION  
REPORTS**

**GENERAL USE SAFETY ACCIDENT INVESTIGATION  
REPORTS**

**→ACCIDENT CLASSES**

**→ACCIDENT TYPES**

**→REPORTABLE VS NONREPORTABLE**

**→TYPES OF ACCIDENT INVESTIGATIONS**

**→ACCIDENT NOTIFICATION PROCEDURES**

**→COLLATERAL INVESTIGATIONS VS ACCIDENT  
INVESTIGATIONS**



## AR 385-40 (SLIDE 3)

### →SPECIAL TYPES OF ACCIDENTS:

MARINE ACCIDENTS (CHAPTER 7)

CHEMICAL AGENT EVENTS (CHAPTER 8)

EXPLOSIVES ACCIDENTS (CHAPTER 9)

RADIATION ACCIDENTS (CHAPTER 10)

NUCLEAR WEAPON AND REACTOR ACCIDENTS (CHAPTER 11)

BIOLOGICAL DEFENSE MISHAPS (CHAPTER 12)

SPECIAL REQUIREMENTS FOR NOTIFICATION,  
INVESTIGATION, AND REPORTING





## DA PAM 385-40

- INVESTIGATION PROCEDURES
- DETAILED REPORTING REQUIREMENTS AND FORMS

## USASC STUDENT HANDOUT

- HOW TO COMPLETE DA FORM 285-AB (INCLUDES CODES)



### DA FORM 285 - OLD VS NEW

A vertical diagram of the DA Form 285 - Long Form. It consists of a single column with 79 horizontal lines. The lines are grouped into four sections by horizontal red lines: the first section has 23 lines, the second has 23 lines, the third has 23 lines, and the fourth has 10 lines. Each section begins with a small black square icon.

**DA FORM  
285 - LONG  
FORM**

- 5 PAGES
- 79  
BLOCKS

A diagram of the DA Form 285-AB (AGAR) - Short Form. It is a single rectangular block with 23 horizontal lines.A diagram of the DA Form 285-AB (AGAR) - Short Form. It is a single rectangular block with 23 horizontal lines.

- DA FORM 285-AB  
(AGAR) - SHORT FORM**
- 2 PAGES (1 PAGE,  
BOTH SIDES)
  - 43 BLOCKS



MANSCEN SAFETY  
OFFICE **REPORTING CLASS**

**AND**

## DA FORM 285

### BLOCK 29, BODY PARTS AFFECTED

- ☐ a. Body (General)
- ☐ b. Head
- ☐ c. Forehead
- ☐ d. Eyes
- ☐ e. Nose
- ☐ f. Jaw
- ☐ g. Neck
- ☐ .....
- ☐ u. Toes
- ☐ v. OTHER (Specify)

## DA FORM 285-AB

### BLOCK 20, MOST SEVERE INJURY

a. Degree
b. Type
c. Body Part

# ACCIDENT INVESTIGATION



MANSCENFLW

MANSCEN SAFETY  
OFFICE

AND

REPORTING CLASS

**TRADOC REG 385-2**

- ADDS TRADOC-SPECIFIC REQUIREMENTS

**FLW 385-6**

- FLW-SPECIFIC REQUIREMENTS

**FLW 210-14**

- REQUIREMENTS SPECIFIC TO WEAPONS AND AMMO  
ACCIDENTS AND INCIDENTS (NOT INCLUDING POW)



## PART 2

# BASIC INFORMATION

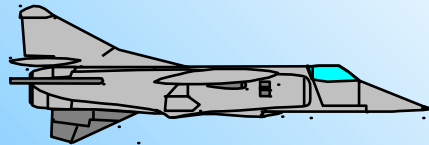
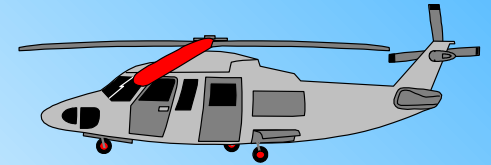


### ACCIDENT CATEGORIES

#### → GROUND OR AVIATION

#### AVIATION ACCIDENT:

- FLIGHT ACCIDENT
- FLIGHT-RELATED
- AIRCRAFT GROUND



ACCIDENT

ACCIDENT



MANSCEN SAFETY

OFFICE **REPORTING CLASS**

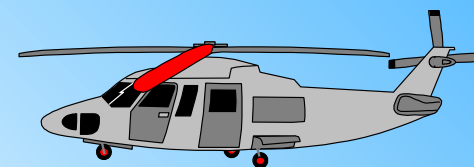
**AND**

ACCIDENT CATEGORIES

→ GROUND OR AVIATION

**AVIATION ACCIDENT:**

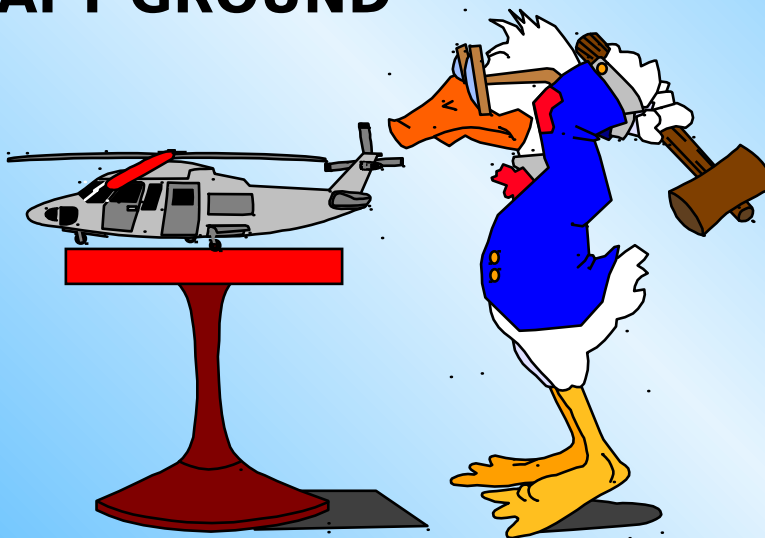
- FLIGHT ACCIDENT
- FLIGHT-RELATED
- AIRCRAFT GROUND



ACCIDENT

~~GROUND~~

~~AVIATION~~



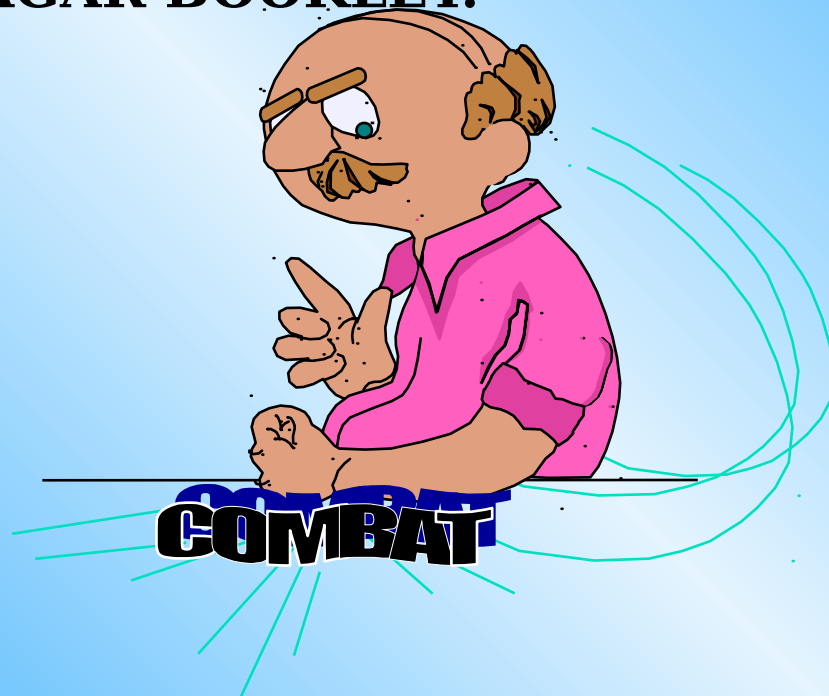


## ACCIDENT CATEGORIES

### → COMBAT OR NON-COMBAT

PROCEDURES FOR NOTIFICATION AND REPORTING OF COMBAT ACCIDENTS DIFFER SLIGHTLY. SEE PARAGRAPH 3-5, FIGURE C-3, AND TABLE E-2 OF AR 385-40. SEE ALSO IN AGAR BOOKLET.

#### ✓ NON-COMBAT

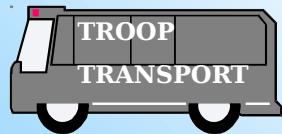






## TYPES OF GROUND ACCIDENTS -1 (PARTIAL LIST)

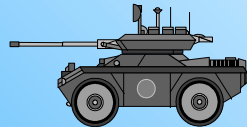
### ▣ AMV ACCIDENTS



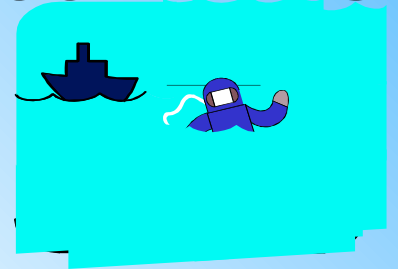
### ▣ POV ACCIDENTS



### ▣ ACV ACCIDENTS



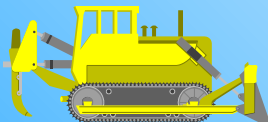
### ▣ MARINE ACCIDENTS



### ▣ FIRES



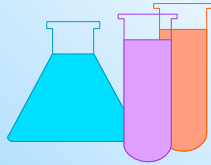
### ▣ OTHER ARMY VEHICLE ACCIDENTS





## TYPES OF GROUND ACCIDENTS - 2 (PARTIAL LIST)

▮ **CHEMICAL AGENT  
EVENTS**



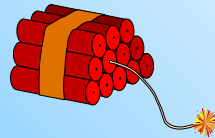
▮ **PERSONNEL INJURY**

-

**OTHER**



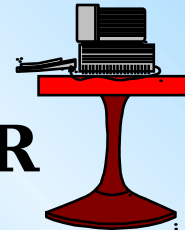
▮ **EXPLOSIVES  
ACCIDENTS**



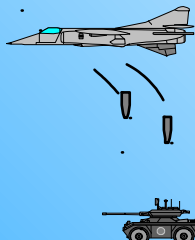
▮ **PROPERTY DAMAGE**

-

**OTHER**



▮ **FRATRICIDE**





### ACCIDENT CLASSES

#### GROUND ACCIDENTS

➔ DETERMINE INVESTIGATION AND REPORTING PROCEDURES

□ BASED UPON COSTS OF DAMAGES, SEVERITY OF

INJURIES, AND # OF PERSONNEL

>> CLASS A

>> CLASS B

>> CLASS C

>> CLASS D

*SEE  
HANDOUT  
#3*

# ACCIDENT INVESTIGATION



MANSCENFLW

MANSCEN SAFETY  
OFFICE

AND

## REPORTING CLASS

### CLASS A:

- \$1,000,000 or more
- Army aircraft or missile destroyed, missing or abandoned OR
- Fatality or permanent total disability

### CLASS B:

- \$200,000 or more but less than \$1,000,000
- Permanent partial disability, OR
- 5 or more persons hospitalized as inpatients

### CLASS C:

- \$10,000 or more but less than \$200,000
- Nonfatal injury causing ANY loss of time from work after day or shift on which it occurred, OR

- Nonfatal occupational illness causing loss of time from work or disability at any time

### CLASS D:

# ACCIDENT INVESTIGATION



MANSCENFLW

MANSCEN SAFETY  
OFFICE  
**REPORTING CLASS**

**AND**

**CLASS A**

**CLASS B**

**CLASS C**

**CLASS D**

## **UNCLASSIFIED ACCIDENTS**

- NO FULL WORKDAY LOST
- LESS THAN \$2,000 DAMAGES

## **INJURIES REQUIRING MEDICAL TREATMENT**

- NO LOST WORKDAYS
- TREATMENT AT A MEDICAL FACILITY (GLWACH, CTMC, ETC.)



### MILITARY INJURY ACCIDENTS

#### CLASS A

FATAL or  
PERM TOTAL  
DISABILITY

#### CLASS B

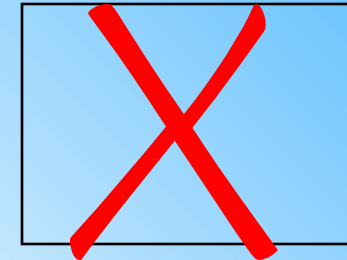
PERM  
PARTIAL  
DISABILITY  
or

5 OR MORE  
HOSPITALIZE  
D

#### CLASS C

LOST  
WORKDAY

#### CLASS D



PROPERTY  
DAMAGE  
ONLY

---

### UNCLASSED ACCIDENTS

TREATMENT  
AT A  
MEDICAL  
FACILITY

OTHERS

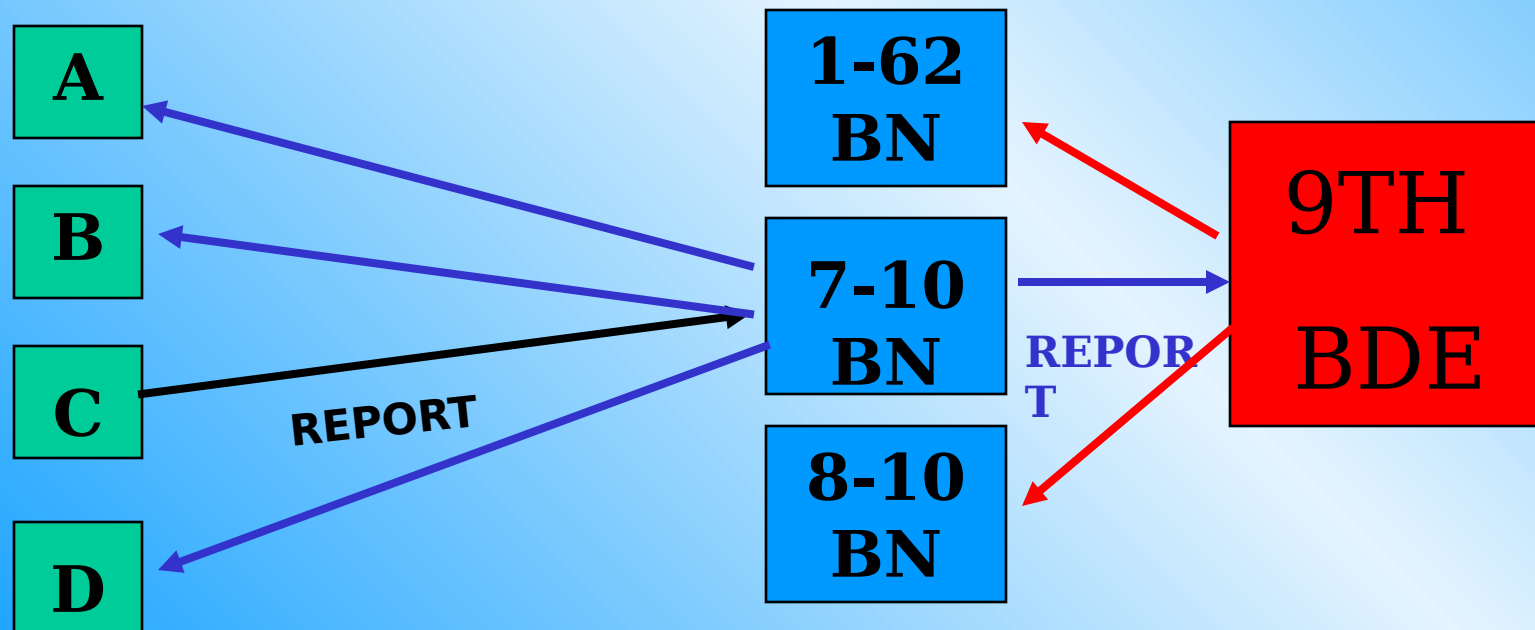


## PURPOSE OF REPORTING ACCIDENTS

### TO PREVENT ACCIDENTS:

1. By sharing information.

EXAMPLE: A SOLDIER AT C CO, 7-10 INF, 9TH TNG BDE IS INJURED.



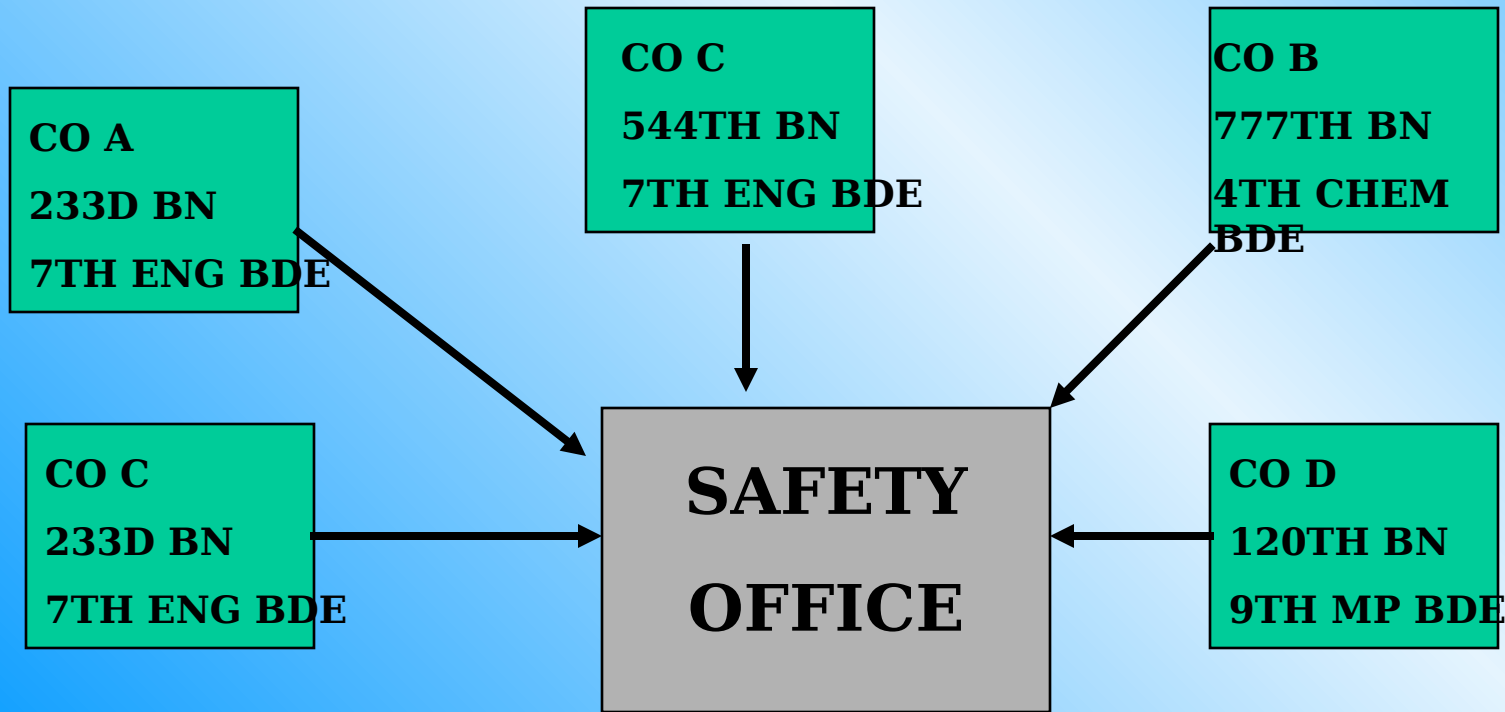


## PURPOSE OF REPORTING ACCIDENTS

### TO PREVENT ACCIDENTS:

2. By establishing trends.

**EXAMPLE: SIMILAR ACCIDENTS OCCUR AT SEVERAL UNITS, AND ALL OF THE RESULTING REPORTS GO TO THE SAFETY OFFICE.**





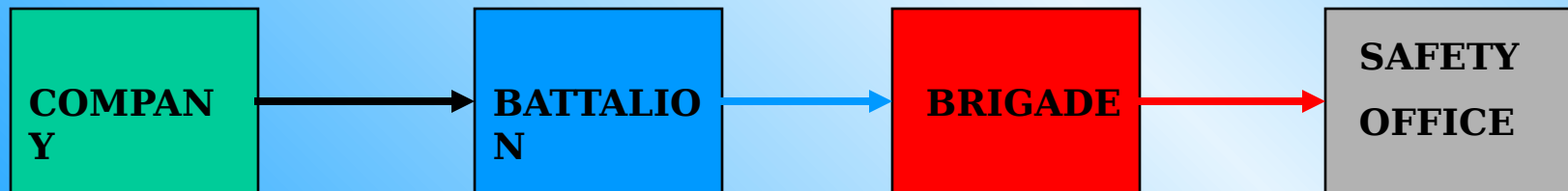


## PURPOSE OF REPORTING ACCIDENTS

### TO PREVENT ACCIDENTS:

3. By causing others to review what happened.

**EXAMPLE: AN ACCIDENT OCCURS AT C CO, AND THE REPORT IS REVIEWED THERE, AT THE BN, AT THE BDE, AND AT THE SAFETY OFFICE.**





MANSCEN SAFETY

OFFICE **REPORTING CLASS**

**AND**

## ACCIDENT REPORTING REQUIREMENTS

**INVESTIGATE AND REPORT ACCIDENTS RESULTING IN:**

- Damage to Army property
- Injury to military personnel (on or off duty)
- Injury to Army civilian personnel (on duty)
- Occupational injury or illness to Army military or civilian personnel (includes NAF)
- Injury or illness to non-Army personnel or damage to non-Army property as a result of Army operations

**All Army accidents will be**

**INVESTIGATED**

**REPORTED**

**ANALYZED**



## **NOT** REPORTABLE AS ACCIDENTS

**INTENTIONALLY SELF-INFLICTED INJURIES**

**CRIMINAL ASSAULTS**

**PRIOR-SERVICE INJURIES**

**HOSPITALIZATION FOR OBSERVATION ONLY**



**INJURIES IN THE ACT OF ESCAPING CUSTODY OR ELUDING ARREST**





MANSCEN SAFETY

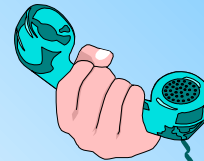
OFFICE **REPORTING** CLASS

**AND**

## REPORTABLE VS RECORDABLE

**REPORTABLE** = MUST NOTIFY SOMEONE ABOUT IT

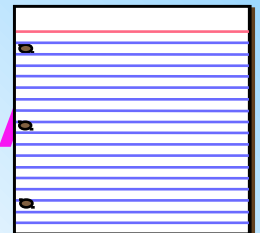
**RECORDABLE** = MUST BE RECORDED ON A WRITTEN FORM AND SENT TO USASC (YOU SEND IT TO MSO)



If it causes **INJURY** or **DAMAGE**, **REPORT** it.

-- Report it to MSO.

Not all **REPORTABLE** accidents are **RECORDABLE**





## REVIEW

- ◆ REFERENCES
- ◆ CATEGORIES
- ◆ TYPES
- ◆ CLASSES
- ◆ REPORTING REQUIREMENTS



### PART III

# CIVILIAN EMPLOYEE INJURY/ILLNESS REPORTING



### CIVILIAN EMPLOYEE INJURY/ILLNESS

#### REPORTING FORMS

**CA-1 : Federal Employee's Notice of Traumatic Injury and Claim for Continuation of Pay/Compensation**

**CA-2 : Notice of Occupational Disease and Claim for Compensation**

**CA-16 : Authorization for Examination and/or Treatment**

**CA-17 : Duty Status Report**

**FLW 662 : Supervisor's Civilian Accident Investigation and Report**

**CA-6 : for fatalities**

**CA-1 or CA-2 : to CPAC**

**CA-16 or CA-17 : to doctor with employee**

**FLW 662 : to MSO**

***FOR THE  
NEXT FEW  
SLIDES,  
TURN TO  
HANDOUT***

***#31***



# CIVILIAN EMPLOYEE ON-DUTY INJURIES AND OCCUPATIONAL ILLNESSES

FEB 2000

## REPORTING REQUIREMENTS

SITUATION	CALL MSO*	CA-1	CA-2	CA-16	CA-17	FLW 662
INJURY - EMPLOYEE LEAVES WORK AND IS TREATED AT GLWACH:	YES	YES		YES	YES	YES
INJURY - EMPLOYEE SEEKS TREATMENT FROM AN OFF-POST DOCTOR:	YES	YES			YES	YES
ILLNESS - EMPLOYEE LEAVES WORK AND IS TREATED AT GLWACH:	YES		YES		YES	YES
ILLNESS - EMPLOYEE SEEKS TREATMENT FROM AN OFF-POST DOCTOR:	YES		YES		YES	YES
INJURY OR ILLNESS - EMPLOYEE DOES NOT LEAVE WORK FOR TREATMENT:	YES	YES				YES

**PROMPTLY REPORT ALL ON-DUTY CIVILIAN INJURIES/OCCUPATIONAL ILLNESSES TO MSO BY PHONE.**

**GIVE NAME, JOB TITLE, & ORGANIZATION OF INJURED; DATE OF ACCIDENT; CAUSE OF ACCIDENT; AND PLANNED COUNTERMEASURES.**

**SEND CA-1 OR CA-2 TO CPAC. SEND CA-16 OR CA-17 TO THE DOCTOR WITH THE EMPLOYEE. IN THE EVENT OF A CIVILIAN ON-DUTY FATALITY, USE CA-6.**

**CONTACT CPAC (Linda Anthony, 6-0293) FOR INFO ON COMPLETION OF CA FORMS.**

**SEND FLW 662 TO MSO WITHIN 72 HOURS OF THE TIME OF THE INJURY OR OCCUPATIONAL ILLNESS.**

32

**ALL ACCIDENTS MUST BE PROPERLY INVESTIGATED**



# CIVILIAN EMPLOYEE ON-DUTY INJURIES AND OCCUPATIONAL ILLNESSES

FEB 2000

## REPORTING REQUIREMENTS

<b>SITUATION</b>	<b>CALL MSO*</b>	<b>CA-1</b>	<b>CA-2</b>	<b>CA-16</b>	<b>CA-17</b>	<b>FLW 662</b>
<b>INJURY - EMPLOYEE LEAVES WORK AND IS TREATED AT GLWACH:</b>	<b>YES</b>	<b>YES</b>		<b>YES</b>	<b>YES</b>	<b>YES</b>
<b>INJURY - EMPLOYEE SEEKS TREATMENT FROM AN OFF-POST DOCTOR:</b>	<b>YES</b>	<b>YES</b>			<b>YES</b>	<b>YES</b>
<b>ILLNESS - EMPLOYEE LEAVES WORK AND IS TREATED AT GLWACH:</b>	<b>YES</b>		<b>YES</b>		<b>YES</b>	<b>YES</b>
<b>ILLNESS - EMPLOYEE SEEKS TREATMENT FROM AN OFF-POST DOCTOR:</b>	<b>YES</b>		<b>YES</b>		<b>YES</b>	<b>YES</b>
<b>INJURY OR ILLNESS - EMPLOYEE DOES NOT LEAVE WORK FOR TREATMENT:</b>	<b>YES</b>	<b>YES</b>				<b>YES</b>

**PROMPTLY REPORT ALL ON-DUTY CIVILIAN INJURIES/OCCUPATIONAL ILLNESSES TO MSO BY PHONE.**

**GIVE NAME, JOB TITLE, & ORGANIZATION OF INJURED; DATE OF ACCIDENT; CAUSE OF ACCIDENT; AND PLANNED COUNTERMEASURES.**

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**CONTACT CPAC (Linda Anthony, 6-0293) FOR INFO ON COMPLETION OF CA FORMS.**

**SEND FLW 662 TO MSO WITHIN 72 HOURS OF THE TIME OF THE INJURY OR OCCUPATIONAL ILLNESS.**

33

**ALL ACCIDENTS MUST BE PROPERLY INVESTIGATED**

# CIVILIAN EMPLOYEE ON-DUTY INJURIES AND OCCUPATIONAL ILLNESSES

FEB 2000

## REPORTING REQUIREMENTS

SITUATION	CALL MSO*	CA-1	CA-2	CA-16	CA-17	FLW 662
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<b>INJURY - EMPLOYEE SEEKS TREATMENT FROM AN OFF-POST DOCTOR:</b>	YES	YES			YES	YES
<b>ILLNESS - EMPLOYEE LEAVES WORK AND IS TREATED AT GLWACH:</b>	YES		YES		YES	YES
<b>ILLNESS - EMPLOYEE SEEKS TREATMENT FROM AN OFF-POST DOCTOR:</b>	YES		YES		YES	YES
<b>INJURY OR ILLNESS - EMPLOYEE DOES NOT LEAVE WORK FOR TREATMENT:</b>	YES	YES				YES

**PROMPTLY REPORT ALL ON-DUTY CIVILIAN INJURIES/OCCUPATIONAL ILLNESSES TO MSO BY PHONE.**

**GIVE NAME, JOB TITLE, & ORGANIZATION OF INJURED; DATE OF INCIDENT; CAUSE OF ACCIDENT; AND PLANNED COUNTERMEASURES.**

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**CONTACT CPAC (Linda Anthony, 6-0293) FOR INFO ON COMPLETION OF CA FORMS.**

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34

**ALL ACCIDENTS MUST BE PROPERLY INVESTIGATED**

# CIVILIAN EMPLOYEE ON-DUTY INJURIES AND OCCUPATIONAL ILLNESSES

FEB 2000

## REPORTING REQUIREMENTS

SITUATION	CALL MSO*	CA-1	CA-2	CA-16	CA-17	FLW 662
INJURY - EMPLOYEE LEAVES WORK AND IS TREATED AT GLWACH:	YES	YES		YES	YES	YES
INJURY - EMPLOYEE SEEKS TREATMENT FROM AN OFF-POST DOCTOR:	YES	YES			YES	YES
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INJURY OR ILLNESS - EMPLOYEE DOES NOT LEAVE WORK FOR TREATMENT:	YES	YES				YES

**PROMPTLY REPORT ALL ON-DUTY CIVILIAN INJURIES/OCCUPATIONAL ILLNESSES TO MSO BY PHONE.**

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**SEND FLW 662 TO MSO WITHIN 72 HOURS OF THE TIME OF THE INJURY OR OCCUPATIONAL ILLNESS.**

35

**ALL ACCIDENTS MUST BE PROPERLY INVESTIGATED**

# CIVILIAN EMPLOYEE ON-DUTY INJURIES AND OCCUPATIONAL ILLNESSES

FEB 2000

## REPORTING REQUIREMENTS

SITUATION	CALL MSO*	CA-1	CA-2	CA-16	CA-17	FLW 662
INJURY - EMPLOYEE LEAVES WORK AND IS TREATED AT GLWACH:	YES	YES		YES	YES	YES
INJURY - EMPLOYEE SEEKS TREATMENT FROM AN OFF-POST DOCTOR:	YES	YES			YES	YES
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ILLNESS - EMPLOYEE SEEKS TREATMENT FROM AN OFF-POST DOCTOR:	YES		YES		YES	YES
INJURY OR ILLNESS - EMPLOYEE DOES NOT LEAVE WORK FOR TREATMENT:	YES	YES				YES

**PROMPTLY REPORT ALL ON-DUTY CIVILIAN INJURIES/OCCUPATIONAL ILLNESSES TO MSO BY PHONE.**

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**SEND FLW 662 TO MSO WITHIN 72 HOURS OF THE TIME OF THE INJURY OR OCCUPATIONAL ILLNESS.**

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**ALL ACCIDENTS MUST BE PROPERLY INVESTIGATED**

# CIVILIAN EMPLOYEE ON-DUTY INJURIES AND OCCUPATIONAL ILLNESSES

FEB 2000

## REPORTING REQUIREMENTS

SITUATION	CALL MSO*	CA-1	CA-2	CA-16	CA-17	FLW 662
INJURY - EMPLOYEE LEAVES WORK AND IS TREATED AT GLWACH:	YES	YES		YES	YES	YES
INJURY - EMPLOYEE SEEKS TREATMENT FROM AN OFF-POST DOCTOR:	YES	YES			YES	YES
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INJURY OR ILLNESS - EMPLOYEE DOES NOT LEAVE WORK FOR TREATMENT:	YES	YES				YES

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**SEND FLW 662 TO MSO WITHIN 72 HOURS OF THE TIME OF THE INJURY OR OCCUPATIONAL ILLNESS.**

**ALL ACCIDENTS MUST BE PROPERLY INVESTIGATED**



# CIVILIAN EMPLOYEE ON-DUTY INJURIES AND OCCUPATIONAL ILLNESSES

FEB 2000

## REPORTING REQUIREMENTS

SITUATION	CALL MSO*	CA-1	CA-2	CA-16	CA-17	FLW 662
INJURY - EMPLOYEE LEAVES WORK AND IS TREATED AT GLWACH:	YES	YES		YES	YES	YES
INJURY - EMPLOYEE SEEKS TREATMENT FROM AN OFF-POST DOCTOR:	YES	YES			YES	YES
ILLNESS - EMPLOYEE LEAVES WORK AND IS TREATED AT GLWACH:	YES		YES		YES	YES
ILLNESS - EMPLOYEE SEEKS TREATMENT FROM AN OFF-POST DOCTOR:	YES		YES		YES	YES
INJURY OR ILLNESS - EMPLOYEE DOES NOT LEAVE WORK FOR TREATMENT:	YES	YES				YES

**PROMPTLY REPORT ALL ON-DUTY CIVILIAN INJURIES/OCCUPATIONAL ILLNESSES TO MSO BY PHONE.**

**GIVE NAME, JOB TITLE, & ORGANIZATION OF INJURED; DATE OF ACCIDENT; CAUSE OF ACCIDENT; AND PLANNED COUNTERMEASURES.**

**SEND CA-1 OR CA-2 TO CPAC. SEND CA-16 OR CA-17 TO THE DOCTOR WITH THE EMPLOYEE. IN THE EVENT OF A CIVILIAN ON-DUTY FATALITY, USE CA-6.**

**CONTACT CPAC (Linda Anthony, 6-0293) FOR INFO ON COMPLETION OF CA FORMS.**

**SEND FLW 662 TO MSO WITHIN 72 HOURS OF THE TIME OF THE INJURY OR OCCUPATIONAL ILLNESS.**

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**ALL ACCIDENTS MUST BE PROPERLY INVESTIGATED**



## REVIEW

- ✓REFERENCES
- ✓ACCIDENT CATEGORIES
- ✓GROUND ACCIDENT TYPES
- ✓GROUND ACCIDENT CLASSES
- ✓ACCIDENT REPORTING REQUIREMENTS
- ✓REPORTABLE ACCIDENTS VS RECORDABLE
- ✓CIVILIAN EMPLOYEE INJURY REPORTING FORMS AND PROCEDURES



## PART IV

# ACCIDENT INVESTIGATION





## ACCIDENT INVESTIGATION

- A. GENERAL INFORMATION**
- B. PRELIMINARY ACCIDENT SITE PROCEDURES**
- C. PHYSICAL EVIDENCE**
- D. WITNESS INTERVIEWS**
- E. FORMS, RECORDS, AND PUBLICATIONS**
- F. SYSTEMIC CAUSE ANALYSIS**
- G. HUMAN FACTORS**
- H. ENVIRONMENTAL FACTORS**
- I. MATERIAL FACTORS**
- J. ANALYSIS AND CORRECTIVE ACTIONS**



## WHO INVESTIGATES

### 1. CIVILIAN accidents or occupational illnesses:

- Supervisor.
- Maybe Safety Office.
- OSHA investigates certain accidents.

### 2. MILITARY class A and B ON-DUTY accidents:

- Investigation board (CAI or IAI).

### 3. Other MILITARY accidents (all class C, all class D, OFF-DUTY class A and B, and unclassified accidents):

- Unit.
- Maybe Safety Office.
- Maybe Range Control (if ammo or explosives involved).
- Maybe outside agencies or organizations (for specific



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**AND**

## ACCIDENT INVESTIGATION BOARDS

➔ **ON-DUTY CLASS A AND B, AND SELECTED OTHER ACCIDENTS**

▢ **TWO TYPES:**

**CAI = CENTRALIZED ACCIDENT INVESTIGATION BOARD**

**IAI = INSTALLATION ACCIDENT INVESTIGATION BOARD**

▢ **PURPOSE:**

**INVESTIGATE**

**ANALYZE**

**ESTABLISH FINDINGS**

**MAKE RECOMMENDATIONS**

**COMPOSE REPORT**





## ACCIDENT INVESTIGATION BOARDS CAI

- ➔ MINIMUM OF THREE MEMBERS
- ▢ OFFICERS, WO's, AND DA CIVILIAN SAFETY PROFESSIONALS
- ▢ MEMBERS NOT FROM UNIT INCURRING THE ACCIDENT
- ▢ PRESIDENT FROM USASC
- ▢ MEMBERS VS ADVISORS
- ▢ COMMON MAKE-UP:
  - MEDICAL OFFICER
  - MAINTENANCE EXPERT
  - WEATHER EXPERT
  - SAFETY OFFICE ADVISOR
  - RECORDER
  - FLIGHT SURGEON FOR AVIATION  
ACCIDENTS





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## ACCIDENT INVESTIGATION BOARDS

### IAI

- ▮ MINIMUM OF THREE PERSONS
- ▮ MEMBERS NOT FROM UNIT INCURRING THE ACCIDENT
- ▮ PRESIDENT FROM FLW

FIELD-GRADE OFFICER OR DA CIVILIAN GS-12 OR HIGHER

- ▮ COMMON MAKE-UP:

MAINTENANCE OFFICER OR TECHNICIAN

MAYBE A MEDICAL OFFICER

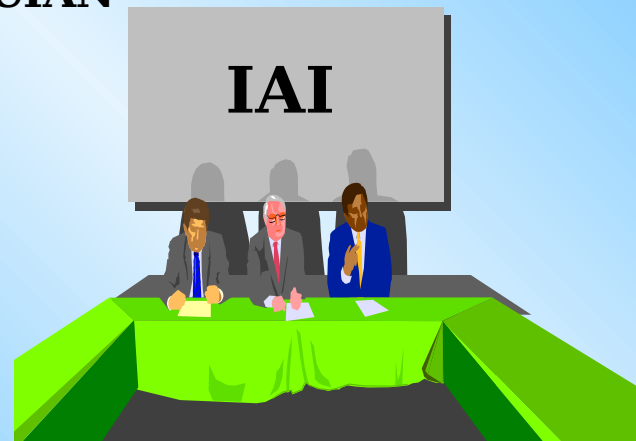
MAYBE A WEATHER EXPERT

SAFETY OFFICE ADVISOR

RECORDER

FLIGHT SURGEON FOR AVIATION

ACCIDENTS





## TYPES OF INVESTIGATIONS

CRIMINAL

>>> SAFETY <<<

COLLATERAL

### ① CRIMINAL

- CID, MPI, ETC.
- TO DETERMINE WHETHER CRIMINAL ACTIVITY OCCURRED

### ② SAFETY

- SAFETY OFFICE, SAFETY OFFICER OR NCO, ACCIDENT INVESTIGATION BOARD
- TO PREVENT FUTURE ACCIDENTS

### ③ COLLATERAL

- AR 27-20, AR 15-6, LINE OF DUTY
- FOR PURPOSES OF LITIGATION, CLAIMS, DISCIPLINARY ACTION, OR ADVERSE ADMINISTRATIVE ACTIONS



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## THE ORDER OF PRIORITY AT AN ACCIDENT SCENE

1. PROTECTION OF HUMAN LIFE AND PREVENTION OF INJURY.
2. PREVENTION/MINIMIZATION OF PROPERTY DAMAGE.
3. PREVENTION OF FUTURE ACCIDENTS.
4. PROSECUTION OF VIOLATORS OF LAWS/STANDARDS.

IF THE INCIDENT IS CLEARLY A CRIMINAL ACT, THE CRIMINAL INVESTIGATORS HAVE PRIORITY.

IF THE INCIDENT IS CLEARLY AN ACCIDENT, THE SAFETY INVESTIGATORS HAVE PRIORITY. WE HAVE PRIORITY UNTIL IT IS DETERMINED THAT IT IS A CRIMINAL ACT.





## TO SHARE OR NOT TO SHARE





# ACCIDENT INVESTIGATION

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## ACCIDENT INVESTIGATION REPORTS

**LIMITED USE**

**>>> GENERAL USE <<<**

### **COMMON TO BOTH TYPES:**

**OFFICIAL DOCUMENTS**

**SOLE PURPOSE IS TO PREVENT FURTHER ACCIDENTS**

**RESTRICTIONS ON USE WITH OTHER REPORTS**

**PROHIBITION ON USE IN ADVERSE ACTIONS**

**RESTRICTIONS ON RELEASE OF REPORTS**

**RESTRICTIONS ON ACCESS TO REPORTS**



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## REPORTING CLASS LIMITED USE SAFETY ACCIDENT INVESTIGATION REPORT

- ◆ CLOSE-HOLD, INTERNAL COMMUNICATIONS OF DA
- ◆ SOLE PURPOSE IS TO PREVENT DA ACCIDENTS
- ◆ REQUIRED FOR:
  - FLIGHT ACCIDENTS
  - FRATRICIDE/FRIENDLY FIRE ACCIDENTS
- ◆ AUTHORIZED FOR USE IN:
  - COMPLEX WEAPONS SYSTEMS, EQUIPMENT, OR MILITARY-UNIQUE ITEMS/EQUIPMENT/ETC. WHEN VITAL TO NATIONAL DEFENSE
- ◆ WITNESSES MAY BE GIVEN A STATEMENT OF CONFIDENTIALITY



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## GENERAL USE SAFETY ACCIDENT INVESTIGATION REPORTS

- ◆ USED FOR ALL RECORDABLE DA ACCIDENTS NOT COVERED BY LIMITED USE REPORTS
- ◆ SOLE PURPOSE IS TO PREVENT ACCIDENTS
- ◆ WITNESSES MAY NOT BE GIVEN A STATEMENT OF CONFIDENTIALITY
- ◆ MAY NOT BE USED FOR ADVERSE ACTIONS WITHIN DOD
- ◆ RESTRICTIONS ON RELEASE ARE SLIGHTLY LESS STRICT

***NOW GO TO  
HANDOUT #5***



### ACCIDENT INVESTIGATIONS QUESTIONS TO ANSWER

- WHAT HAPPENED
- WHY IT HAPPENED
- WHAT TO DO ABOUT IT



### QUESTIONS TO ANSWER

#### WHAT HAPPENED

- MISTAKE OR ERROR INVOLVED
- KEY FACTORS (HUMAN, MATERIAL, ENVIRONMENT) THAT CAUSED OR CONTRIBUTED TO THE ACCIDENT
- HOW INJURIES OCCURRED

#### WHY IT HAPPENED

- SYSTEM INADEQUACIES OR ROOT CAUSES
- IDENTITY OF THOSE THAT PERMITTED THE ACCIDENT TO OCCUR
- HOW THE ERRORS OR FAILURES OCCURRED

#### WHAT TO DO ABOUT IT

- RECOMMENDATIONS FOR PREVENTION
- ACTIONS AND PROPONENT ACTIVITY OR COMMAND LEVEL



## FOUR PHASES TO AN ACCIDENT INVESTIGATION

- ☀ **PRELIMINARY EXAMINATION**
- ② **DATA COLLECTION**
- ③ **ANALYSIS OF DATA**
- ④ **COMPLETION OF THE REPORT**



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## **PRELIMINARY EXAMINATION**

- PREPARATIONS
- INITIAL VISIT TO ACCIDENT SITE

## **② DATA COLLECTION**

- HUMAN FACTORS
- MATERIAL FACTORS
- ENVIRONMENTAL FACTORS
- WITNESS INTERVIEWS
- PHYSICAL EVIDENCE
- FORMS, RECORDS, PUBLICATIONS



## **③ ANALYSIS OF DATA**

- ONGOING THROUGHOUT DATA COLLECTION PHASE
- SHOULD FOCUS ON DETERMINING WHY THE ACCIDENT OCCURRED
- CONCLUSIONS WILL BE THE BASIS FOR FINDINGS AND RECOMMENDATIONS

## **④ COMPLETION OF THE REPORT**

- DESCRIBES WHAT HAPPENED, WHY IT HAPPENED, AND WHAT TO DO ABOUT IT
- RECORD ALL RELEVANT EVIDENCE
- PROPER, THOROUGH, AND TIMELY COMPLETION ARE ESSENTIAL





# ACCIDENT INVESTIGATION

- A. GENERAL INFORMATION
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***NOW GO TO  
HANDOUT #6***



## PRELIMINARY ACCIDENT SITE PROCEDURES

- 1. FIRST PRIORITY - SAFETY OF PERSONNEL.**
  - Tend to the victims.
  - Remove hazards.
  - If necessary, rope off the area.
- 2. PROTECT THE ENVIRONMENT.**
- 3. PRESERVE THE EVIDENCE.**
- 4. IDENTIFY WITNESSES.**
- 5. NOTIFY PROPER OFFICES.**



## ACCIDENT INVESTIGATION

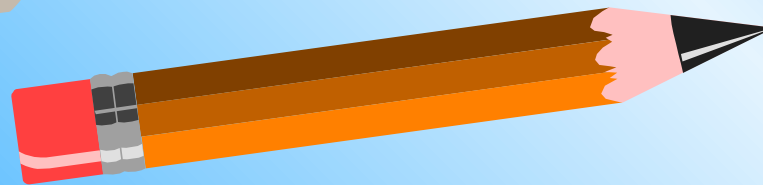
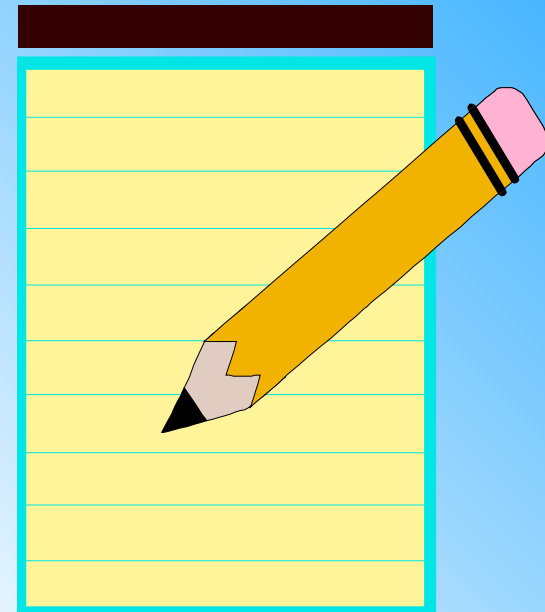
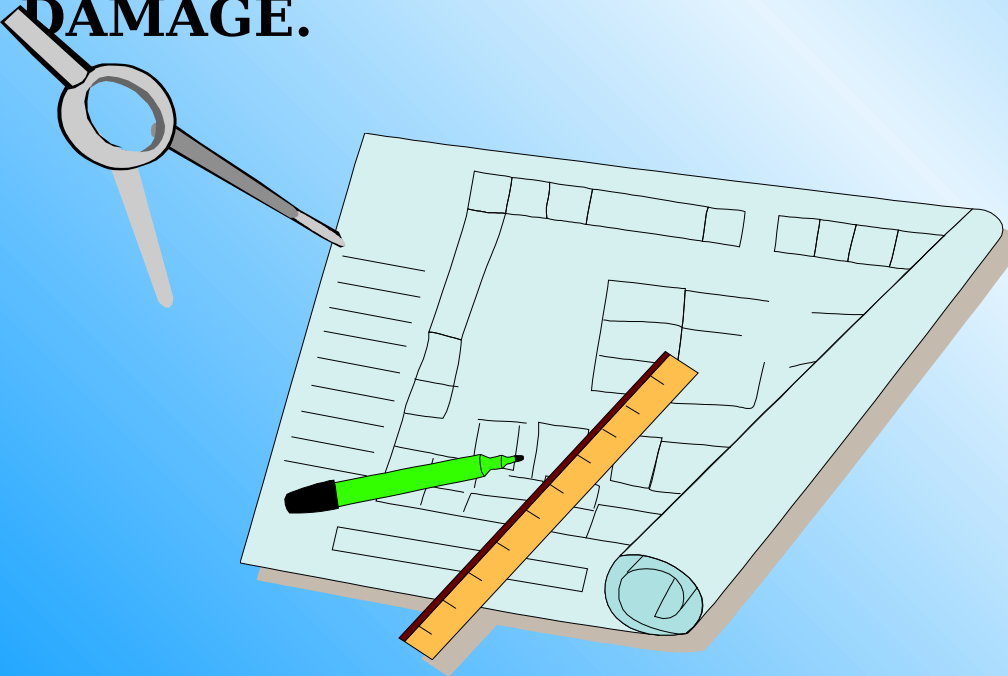
- A. GENERAL INFORMATION
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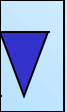
***GO TO  
HANDOUT  
#7***



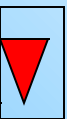
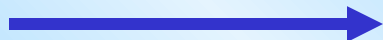
## PHYSICAL EVIDENCE

- **CONSIDER MAKING SKETCHES OF SITE AND/OR DAMAGE.**

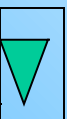
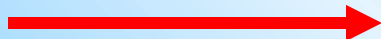




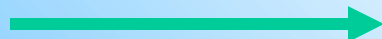
**Vehicle #1 and path**



**Vehicle #2 and path**



**Vehicle #3 and path**



**Intersection of  
Oregon Ave. (N-S) and  
Texas Ave. (E-W)**



**Speeds:**

**V1 - 20 MPH**

**V2 - 34 MPH**

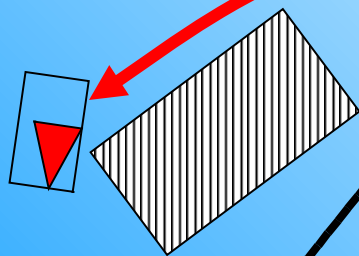
**V3 - 35 MPH**

**35 MPH limit for  
each ave.**

**Dry, asphalt  
pavement**

**60° skid  
marks**

**20'**



**V2 slides  
sideways**

**C**

**V1 fails to stop at Stop sign,  
entering intersection (A). V2  
attempts to stop and veers to  
left (B) but strikes V1 in area  
of driver's door (C), causing  
V1 to veer to its right. V2  
veers sharply to its left, to  
avoid V3, causing V2 to skid  
sideways and stop south of  
Texas Ave. V3 strikes V1 in rear**



### PHYSICAL EVIDENCE

- ☛ **POSSIBLY INCLUDE MEASUREMENTS FROM KNOWN POINTS.**
- ☛ **RECORD DAMAGE TO PROPERTY.**
  - Extensive damage to right front quarterpanel....
  - Front grill smashed.....
  - Front bumper bent on driver's side....
  - Hood buckled slightly....
  - Windshield extensively cracked in three places...





## PHYSICAL EVIDENCE

### • TAKE PHOTOGRAPHS:

- TAKE NOTES TO BACK THE PHOTO
- LABEL ALL PICTURES.





## PHYSICAL EVIDENCE

- IF NECESSARY, INDICATE SIZE OF ITEM PHOTOGRAPHED







## PHYSICAL EVIDENCE

- LOOK FOR ANYTHING OUT OF THE ORDINARY.
- CONSIDER HAVING BLOOD SAMPLES TAKEN.
- PROPERLY HANDLE ALL PHYSICAL EVIDENCE.





# ACCIDENT INVESTIGATION

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***GO TO  
HANDOUT #8***



## WITNESS INTERVIEWS (1)

1. IDENTIFY WITNESSES.
2. TAKE STATEMENTS AS SOON AS POSSIBLE.
3. THE INTERVIEW:
  - EXPLAIN PURPOSE.
  - ESTABLISH RAPPORT.
  - INTERVIEW ONE WITNESS AT A TIME.

"O.K., Tom says the accident is Mary's fault. How many of you agree?"





### WITNESS INTERVIEWS (2)

- MINIMIZE DISTRACTIONS.
- DON'T GANG UP ON WITNESSES.
- FOCUS ON GENERAL AREAS AT FIRST.
- BE INFORMAL, NOT RIGID.
- LET THE WITNESS TALK, IN HIS OWN WORDS.
- ACT INTERESTED.
- ALLOW PAUSES.



## WITNESS INTERVIEWS (3)

### 4. USE OF TAPE RECORDER.

- TEST IT FIRST.
- CHECK THE BATTERIES.
- AVOID LOUD NOISE.
- IDENTIFY THE WITNESS ON TAPE.



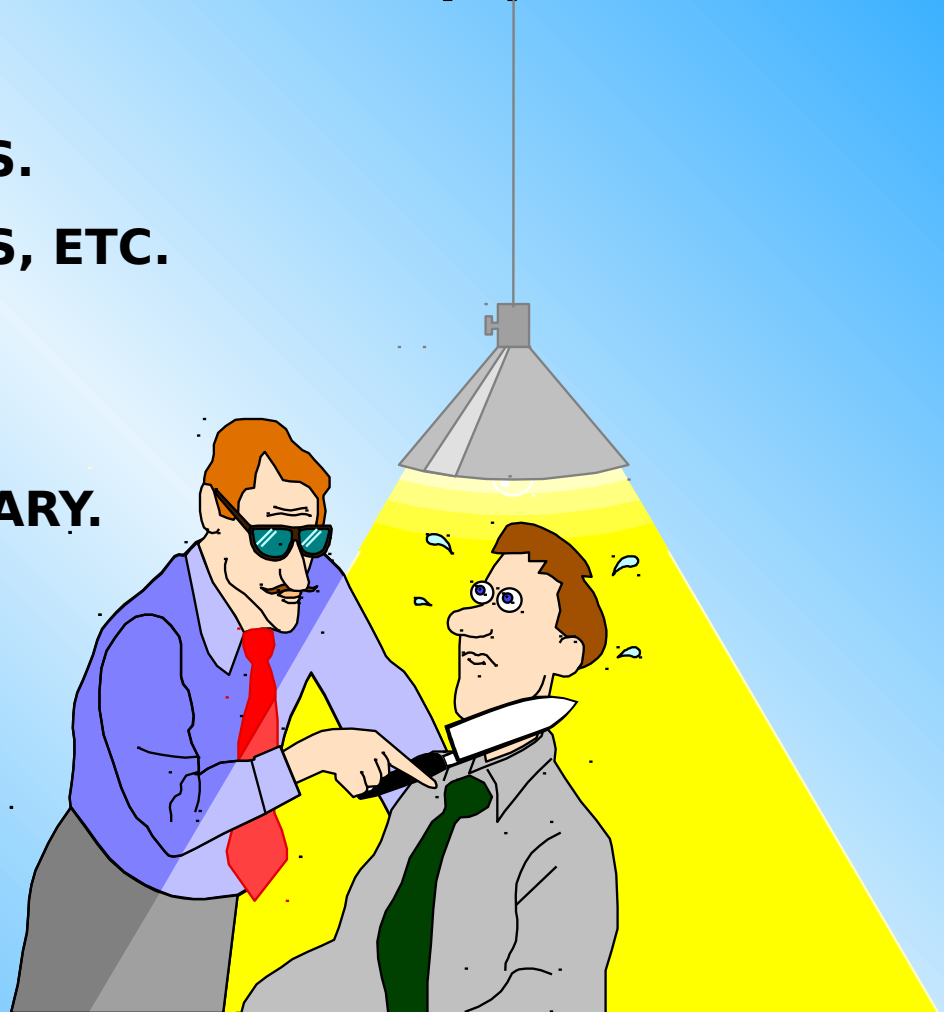
- 5. ENCOURAGE THE WITNESS TO TELL HIS PERSONAL KNOWLEDGE.
- 6. DO NOT LEAD THE WITNESS.
- 7. DO NOT INTERRUPT.



## WITNESS INTERVIEWS (4)

### 8. ASK QUESTIONS:

- DO NOT SUGGEST ANSWERS.
- EYEGLASSES, HEARING AIDS, ETC.
- AVOID TECHNICAL TERMS.
- STICK TO THE SUBJECT.
- GO TO THE SITE, IF NECESSARY.
- ALLOW SKETCHES.
- ALWAYS BE COURTEOUS.





## ACCIDENT INVESTIGATION

- A. GENERAL INFORMATION
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***GO TO  
HANDOUT #9***





### WITNESS INTERVIEW FOLLOW-UP

- ◆ **OBTAIN POSITIVE IDENTIFICATION TO IDENTIFY THE WITNESS.**
- ◆ **DON'T TRANSCRIBE STATEMENT VERBATIM.**
  - **SUMMARIZE.**
  - **INCLUDE ALL INFORMATION THAT HELPS EXPLAIN WHY THE ACCIDENT OCCURRED.**
  - **USE THIRD PERSON. ("SGT JONES WAS DRIVING.... SHE THEN OBSERVED....")**
- ◆ **ANALYZE WITNESS STATEMENTS.**
  - **CONDUCT FOLLOW-UP INTERVIEW IF NECESSARY.**
  - **CHECK FOR CONFLICTS OR CONTRADICTIONS.**
- ★ **EVALUATE WHAT THE WITNESS SAID AND HIS**





## ACCIDENT INVESTIGATION

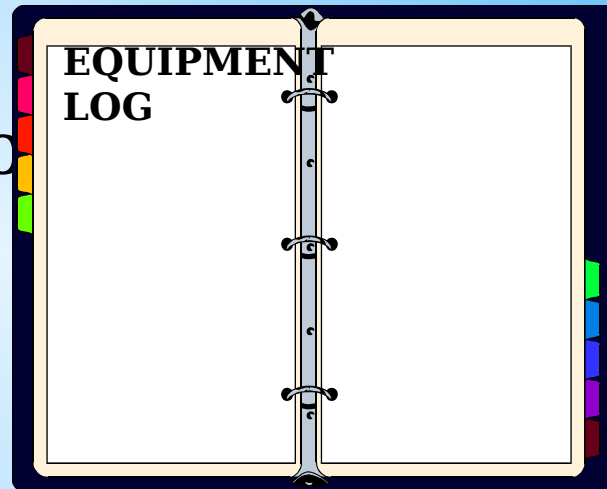
- A. GENERAL INFORMATION
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***GO TO  
HANDOUT  
#10***

## FORMS, RECORDS, PUBLICATIONS

- ◆ EQUIPMENT RECORDS
- ◆ MAINTENANCE RECORDS
- ◆ OPERATOR'S QUALIFICATION
- ◆ TRAINING RECORDS
- ◆ ARs, TMs, FMs, UNIT SOPs,

OF 348



COMPARE ACTUAL  
PERFORMANCE  
TO  
STANDARD PROCEDURE



## ACCIDENT INVESTIGATION

- A. GENERAL INFORMATION
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***GO TO  
HANDOUT  
T #11***



## SYSTEMIC CAUSE ANALYSIS

- ◆ **ADVERSE INTERACTIONS OF MAN, MACHINE, AND ENVIRONMENT**
- ◆ **DETERMINE WHAT FACTORS CAUSED OR CONTRIBUTED TO THE ACCIDENT:**
  - **HUMAN FACTORS**
  - **MATERIAL FACTORS**
  - **ENVIRONMENTAL FACTORS**



### SYSTEMIC CAUSE ANALYSIS

- ◆ **80 TO 95% OF ACCIDENTS ARE CAUSED BY HUMAN FACTORS**
  - **FAILURE TO FOLLOW PROPER PROCEDURES**
- ◆ **THE HUMAN, MATERIAL, AND ENVIRONMENTAL FACTORS CAN USUALLY BE ATTRIBUTED TO ONE OR MORE SYSTEM INADEQUACIES.**



## SYSTEMIC CAUSE ANALYSIS

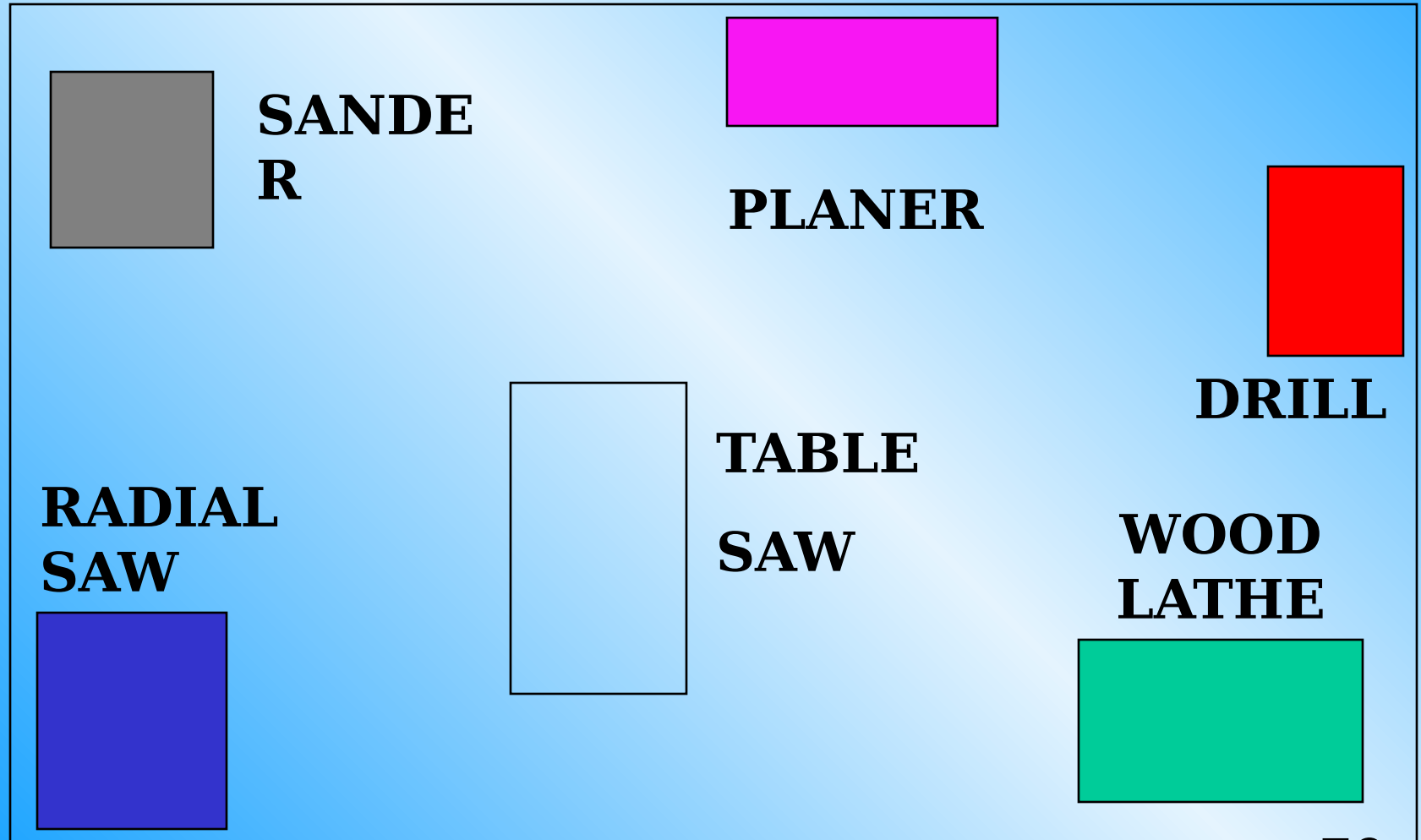
◆ **THE DEFICIENCIES ARE USUALLY CAUSED BY ONE OR MORE OF THESE:**

- **SUPPORT FAILURES**
- **STANDARDS FAILURES**
- **TRAINING FAILURES**
- **LEADER FAILURES**
- **INDIVIDUAL FAILURES**

◆ **THE GOAL IS TO TRACE THE CAUSE BACK TO THESE SYSTEMS INADEQUACIES (ROOT CAUSES), SO THESE CAUSES CAN BE CORRECTED OR MINIMIZED.**



## WOODWORKING SHOP







**TABLE SAW**

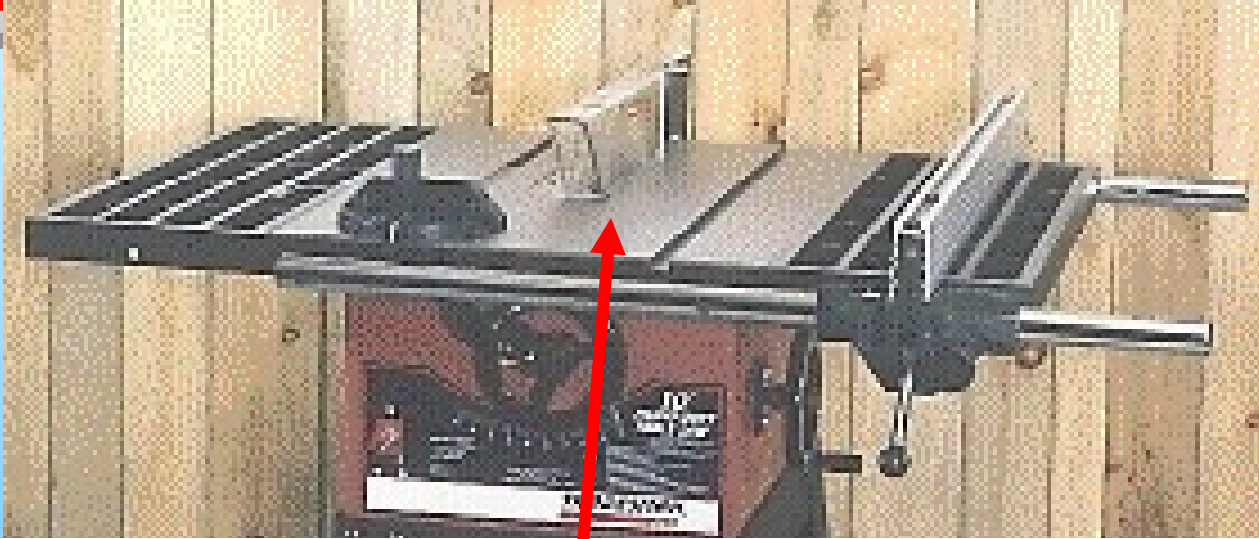
# ACCIDENT INVESTIGATION

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OFFICE  
**REPORTING CLASS**

**AND**



**BLADE AND BLADE GUARD**

# ACCIDENT INVESTIGATION



MANSCENFLW

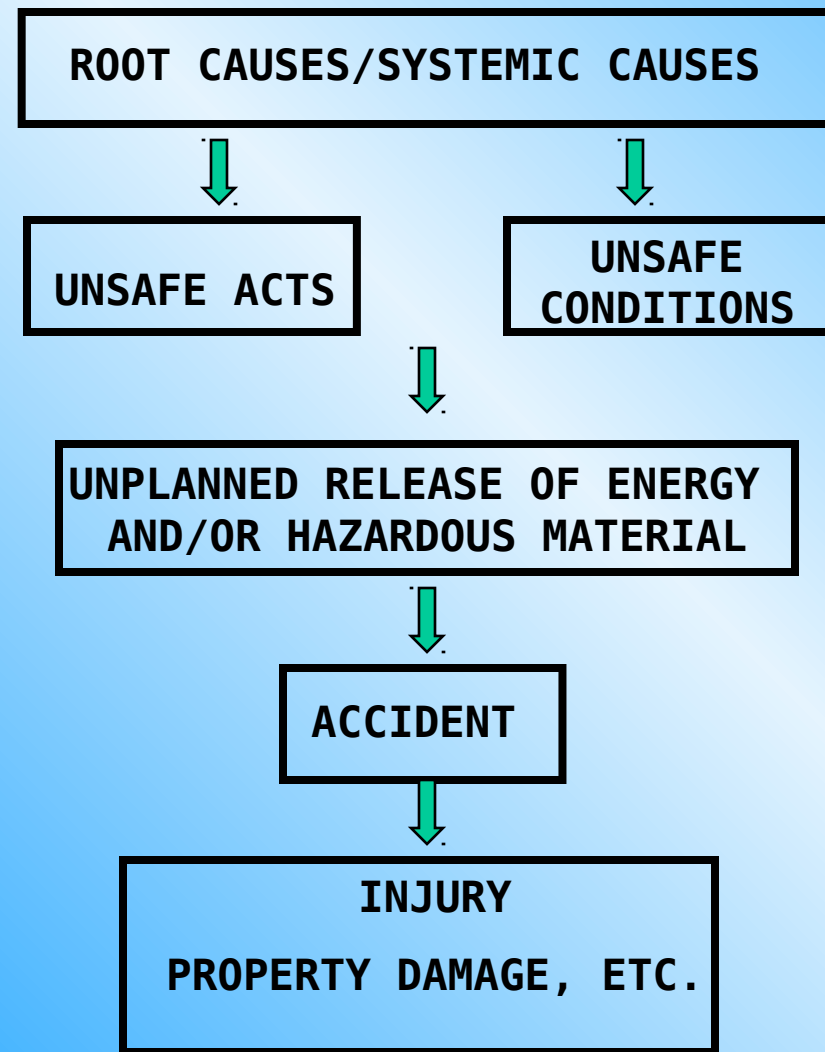
MANSCEN SAFETY  
OFFICE

AND

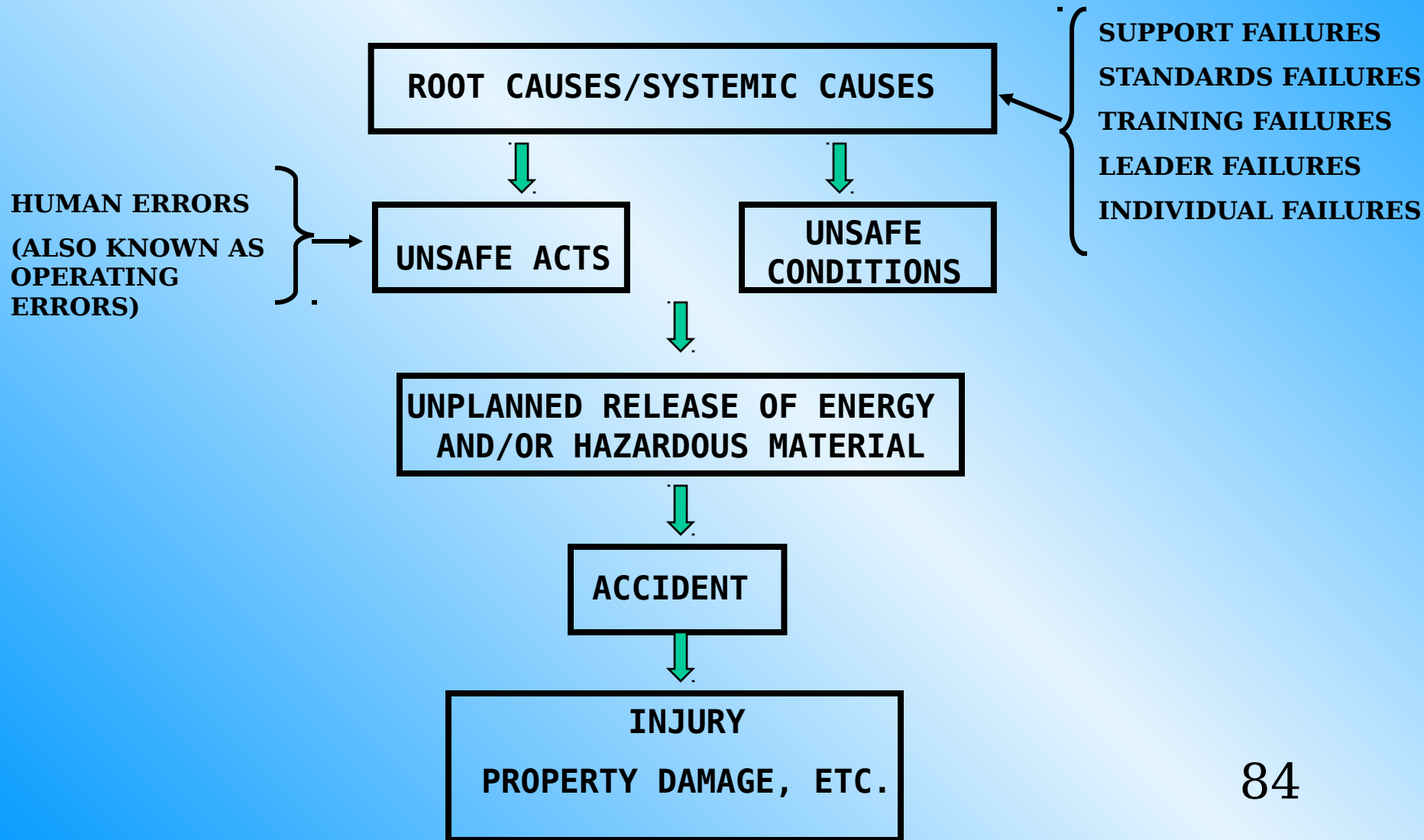
REPORTING CLASS



## SYSTEMIC CAUSE ANALYSIS



## SYSTEMIC CAUSE ANALYSIS



MANSCENFLW

MANSCEN SAFETY  
OFFICE

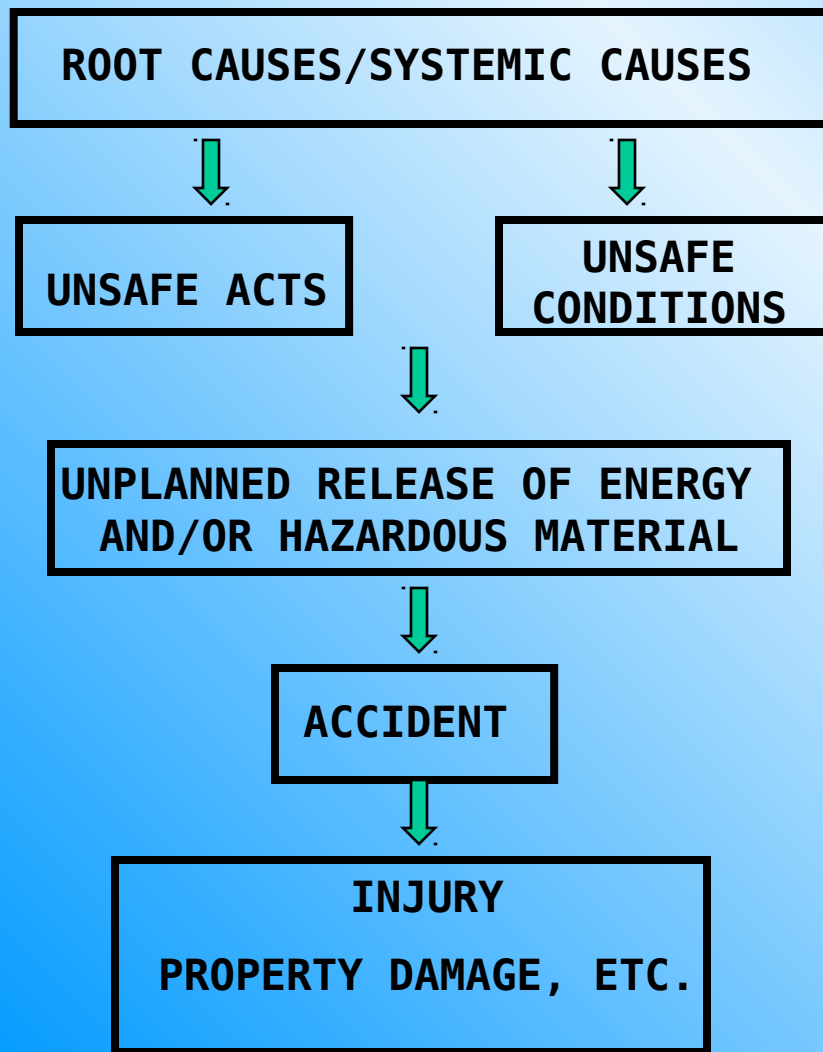
REPORTING CLASS

SYSTEMIC CAUSE ANALYSIS

AND



# ACCIDENT INVESTIGATION



## WORKER CUTS HIS THUMB OFF

**SUPERVISOR DID NOT ENFORCE  
RULES**



**BLADE GUARD REMOVED**



**SPINNING BLADE - ENERGY  
EXERTED AGAINST THUMB**



**BLADE CONTACTED THUMB**



**SEVERED THUMB 85**



## ACCIDENT INVESTIGATION

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- H. MATERIAL FACTORS**
- I. ANALYSIS AND CORRECTIVE ACTIONS**

***GO TO  
HANDOUT  
#12.***



# ACCIDENT INVESTIGATION

MANSCENFLW



MANSCEN SAFETY  
OFFICE

AND

REPORTING CLASS

## HUMAN FACTORS

### ◆ THERE IS A REASON FOR ALL HUMAN BEHAVIOR

- ONCE IT HAS BEEN IDENTIFIED AND DEFINED, IT CAN BE MODIFIED OR IMPROVED, REDUCING THE PROBABILITY OF SIMILAR HUMAN ERRORS AND THEIR CONSEQUENCES IN THE FUTURE.

### ◆ FIVE PRIMARY SYSTEMS INADEQUACIES RESPONSIBLE FOR HUMAN ERRORS: SUPPORT, STANDARDS, TRAINING, LEADER, INDIVIDUAL

### ◆ TO IDENTIFY THE ROOT CAUSES, WORK BACKWARDS FROM THE MISTAKE OR ERROR, BY ASKING QUESTIONS AIMED AT DISCOVERING THE ERROR

### ◆ THE BEST SOURCE OF INFO IS THE INDIVIDUAL WHO MADE THE MISTAKE

- IF HE ADMITS THE ERROR, ASK HIM WHY HE COMMITTED THE ERROR

- IF HE DOESN'T RECOGNIZE OR ACKNOWLEDGE THE ERROR, CONTINUE WITH OTHER QUESTIONS. TRY TO NOT MAKE THE WITNESS DEFENSIVE OR UNCOOPERATIVE



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OFFICE

AND

## REPORTING CLASS

- ASK GENERAL QUESTIONS, DESIGNED TO IDENTIFY POSSIBLE SYSTEMS INADEQUACIES.

- LATER, TRY DIRECT QUESTIONS ABOUT THE ROOR, AGAIN.

- YOU MAY ALSO LEARN MORE ABOUT THE WITNESS' ERRORS FROM RECORDS OR OTHER WITNESSES

♦ CONSIDER A POST-ACCIDENT MEDICAL EXAM, TO IDENTIFY SUCH FACTORS AS ACUTE FATIGUE, ALCOHOL, DRUGS, IMPAIRED VISION, ETC.

♦ TRY TO DETERMINE:

- HOW THE TASK SHOULD BE PERFORMED (STANDARD).

- HOW THE TASK WAS PERFORMED (ACTUAL).

- HOW HE DEVIATED FROM THE STANDARD (ERROR).

- HOW THE ERRORS CAUSED OR CONTRIBUTED TO THE ACCIDENT.

- WHAT ROOT CAUSES LED TO THOSE ERRORS (SYSTEMS INADEQUACIES).



## **HUMAN FACTORS**

### **FIVE SYSTEM INADEQUACIES**

**SUPPORT FAILURE**

**STANDARDS FAILURE**

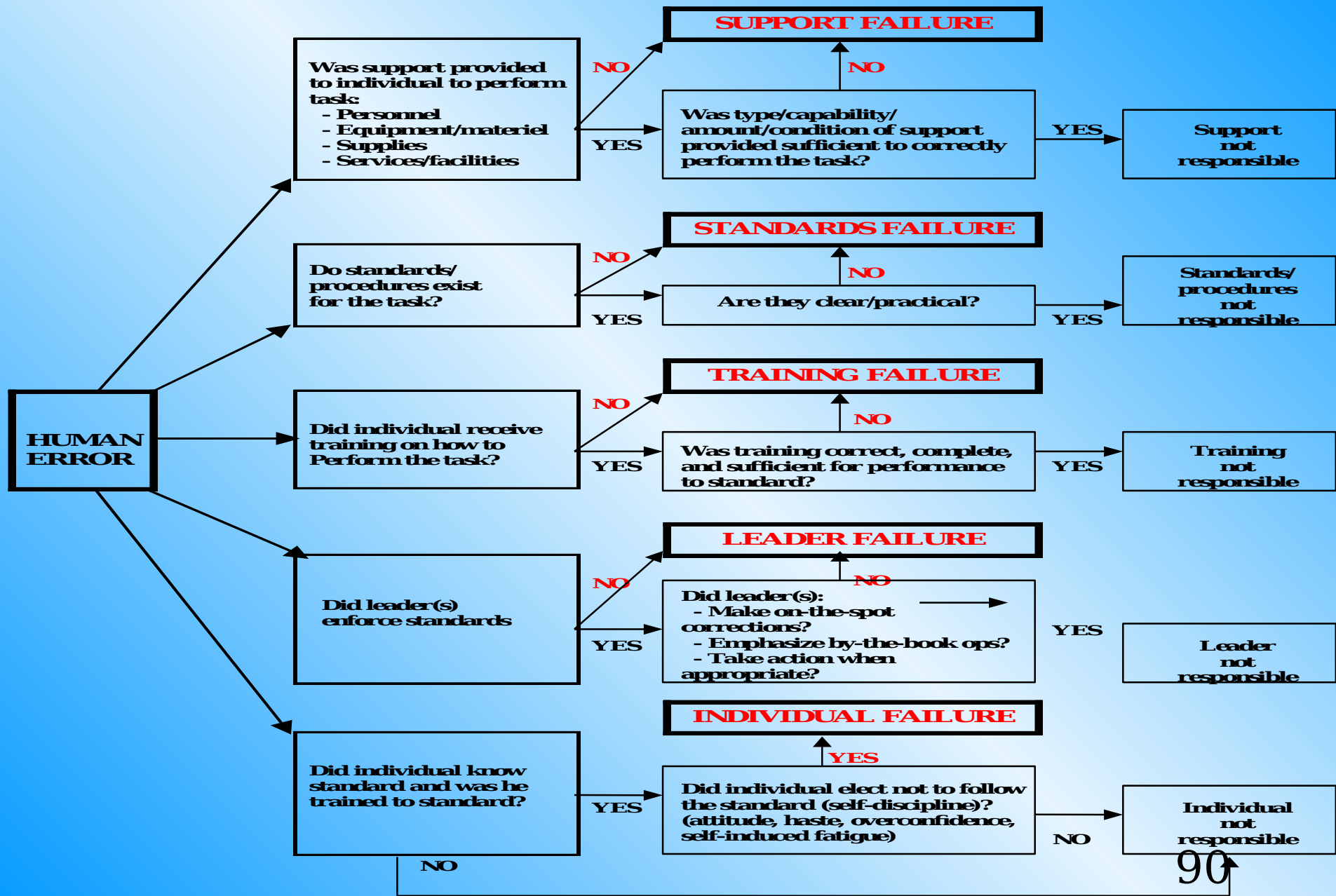
**TRAINING FAILURE**

**LEADER FAILURE**

**INDIVIDUAL FAILURE**

***GO TO  
HANDOUT  
T #13***

# **DETERMINING SYSTEM INADEQUACY (IES) RESPONSIBLE FOR HUMAN ERROR**





# ACCIDENT INVESTIGATION

- A. GENERAL INFORMATION
- B. PRELIMINARY ACCIDENT SITE PROCEDURES
- C. PHYSICAL EVIDENCE
- D. WITNESS INTERVIEWS (FOLLOW-UP)
- E. FORMS, RECORDS, AND PUBLICATIONS
- F. SYSTEMIC CAUSE ANALYSIS
- F. HUMAN FACTORS
- G. ENVIRONMENTAL FACTORS
- H. MATERIAL FACTORS
- I. ANALYSIS AND CORRECTIVE ACTIONS

**GO TO  
HANDOUT  
#14**



## ENVIRONMENTAL FACTORS



1. WHAT WERE THE CONDITIONS AT THE TIME?
2. COULD THEY HAVE CONTRIBUTED TO THE ACCIDENT?
3. COULD THEY HAVE BEEN AVOIDED?
  - COULD THEIR EFFECTS HAVE BEEN REDUCED OR ELIMINATED?





# ACCIDENT INVESTIGATION

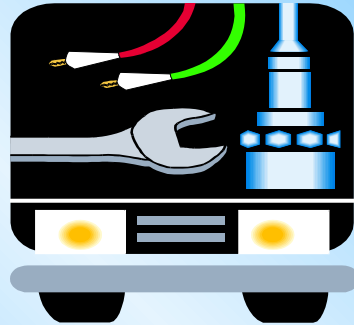
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***GO TO  
HANDOUT  
#15***





## MATERIAL FACTORS



- 1. COULD FAILURES HAVE CAUSED OR CONTRIBUTED?**
- 2. WHAT FAILURES OR MALFUNCTIONS OCCURRED?**
- 3. WHY DID THEY OCCUR?**
  - SYSTEMIC FAILURE?**



## ACCIDENT INVESTIGATION

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- I. ANALYSIS AND CORRECTIVE ACTIONS**

***GO TO  
HANDO  
UT #16***



## ANALYSIS AND CORRECTIVE ACTIONS



1. DETERMINE WHAT CAUSED THE ACCIDENT AND WHY.
2. TAKE OR RECOMMEND CORRECTIVE ACTIONS.
  - LOGICAL AND FEASIBLE.
  - TAILORED TO SYSTEMS INADEQUACIES.
  - DIRECTED TO PROPER LEVEL OF COMMAND.



## PART V

# MILITARY ACCIDENT REPORTING

***FOR THE NEXT SEVERAL  
SLIDES, GO TO HANDOUTS 17  
AND 17A***

# GROUND ACCIDENTS NOTIFICATION AND REPORTING REQUIREMENTS

MSO

ON DUTY

MAY 2000

ACCIDENT CLASSES	NOTIFY MSO	TNW <sup>*1</sup>	AGAR <sup>*2</sup>	WHO INVESTIGATES	DA 285
A	*3	*5	NOT REQUIRED	*7	*8
B	*3	*5	REQUIRED	*7	*8
C	*4	NOT REQUIRED	REQUIRED	UNIT *9	NOT REQUIRED
D	*4	NOT REQUIRED	*6	UNIT *9	REQUIRED

If the accident fits one of the categories below but also falls under the criteria for a class A, B, C, or D accident, use the procedures for that class of accident (ABOVE). Otherwise, use the procedures BELOW.

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EXPLOSIVES <sup>*11</sup>	*4	NOT REQUIRED	*6	UNIT *9	REQUIRED
WEAPONS/AMMO <sup>*12</sup>	*13	NOT REQUIRED	*6	*14	NOT REQUIRED
OTHER INJURIES <sup>*15</sup>	*4	NOT REQUIRED	*16	UNIT *9	REQUIRED
OTHER <sup>*17</sup>	*4	NOT REQUIRED	NOT REQUIRED	UNIT *9	REQUIRED
PROP.DAMAGE					REQUIRED

\*1 TNW = Telephonic Notification Worksheet (DA Form 7306-R) \*5 MSO or SDO will immediately notify USASC.

\*2 AGAR = Abbreviated Ground Accident Report (DA Form 285-AB-R)

\*3 Notify MSO IMMEDIATELY by phone. Use Telephonic Accident Report (FLW Form 291-R) During non-duty hours, notify SDO.

\*4 Report to MSO by phone or e-mail.

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OTHER PROP. DAM. <sup>*17</sup>	*4	NOT REQUIRED	NOT REQUIRED	UNIT *9	NOT REQUIRED

\*6 Submit AGAR to MSO within 10 workdays.

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\*10 AMVA = Army Motor Vehicle Accident. Report regardless of \$ cost of damages.

\*11 Any mishap involving explosives (see Chapter 9 of AR 385-40).

\*12 Any accident, incident, or malfunction involving weapons or ammunition, other than privately owned weapons.

\*13 IMMEDIATELY notify Range Control.

\*14 Range Control will investigate, with assistance from others, as required.

\*15 For injuries that do not result in loss of a full day/shift AFTER the day/shift on which the injury occurred, use these procedures:

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# GROUND ACCIDENTS NOTIFICATION AND REPORTING REQUIREMENTS

MSO

ON DUTY

MAY 2000

ACCIDENT CLASSES	NOTIFY MSO	TNW <sup>*1</sup>	AGAR <sup>*2</sup>	WHO INVESTIGATES	DA 285
A	*3	*5	NOT REQUIRED	*7	*8
B	*3	*5	REQUIRED	*7	*8
C	*4	NOT REQUIRED	REQUIRED	UNIT *9	NOT REQUIRED
D	*4	NOT REQUIRED	*6	UNIT *9	REQUIRED

If the accident fits one of the categories below but also falls under the criteria for a class A, B, C, or D accident, use the procedures for that class of accident (ABOVE). Otherwise, use the procedures BELOW.

AMVA <sup>*10</sup>	*4	NOT REQUIRED	*6	UNIT *9	NOT REQUIRED
EXPLOSIVES <sup>*11</sup>	*4	NOT REQUIRED	*6	UNIT *9	REQUIRED
WEAPONS/AMMO <sup>*12</sup>	*13	NOT REQUIRED	*6	*14	REQUIRED
OTHER INJURIES <sup>*15</sup>	*4	NOT REQUIRED	*16	UNIT *9	NOT REQUIRED
OTHER <sup>*17</sup>	*4	NOT REQUIRED	NOT REQUIRED	UNIT *9	REQUIRED
PROP.DAMAGE					REQUIRED

\*1 TNW = Telephonic Notification Worksheet (DA Form 7306-R) \*5 MSO or SDO will immediately notify USASC.

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\*3 Notify MSO IMMEDIATELY by phone. Use Telephonic Accident Report (FLW Form 291-R) During non-duty hours, notify SDO.

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# GROUND ACCIDENTS NOTIFICATION AND REPORTING REQUIREMENTS

MSO

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OTHER PROP. DAM. <sup>*17</sup>	<sup>*4</sup>	NOT REQUIRED	NOT REQUIRED	UNIT <sup>*9</sup>	NOT REQUIRED

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<sup>\*15</sup> For injuries that do not result in loss of a full day/shift AFTER the day/shift on which the injury occurred, use these procedures:

- If the injury occurs during training or mission sustainment AND results in treatment at a medical facility (GLWACH, CMTC, etc.), use Record of Minor Injury Form to report the injury
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ACCIDENT INVESTIGATION

MANSCENFLW



MANSCEN SAFETY  
OFFICE

AND

REPORTING CLASS

WHAT FORM TO USE

GO TO HANDOUT  
FORM #18

CLASS

A OR B (ON DUTY)	DA 285
A OR B (OFF DUTY)	DA 285-AB
C OR D (ON OR OFF DUTY)	DA 285-AB

UNCLASSIFIED

TREATMENT AT MEDICAL FACILITY IF INJURY OCCURS DURING TRAINING OR MISSION SUSTAINMENT	RECORD OF MINOR INJURY FORM
---	-----------------------------------

FIRST AID ONLY (NOT AT MEDICAL  
FACILITY)

NONE

NO MEDICAL TREATMENT

NONE



WHAT FORM TO USE (2)

CLASS

FORM

UNCLASSED (CONT)

ARMY MOTOR VEHICLE ACCIDENT

DA 285-AB

EXPLOSIVES

DA 285-AB

WEAPONS OR AMMO (NOT POW)

DA 285-AB

OTHER PROPERTY DAMAGE

NONE

(LESS THAN \$2,000 AND NOT ONE  
OF THE ABOVE CATEGORIES)

NOTE: IF ANY OF THESE RESULTS IN \$2,000 OR MORE IN DAMAGES OR A  
LOST-WORKDAY INJURY, THE ACCIDENT WILL BE A CLASS A, B, C, OR D,  
AND YOU MUST USE THE APPROPRIATE FORM FOR REPORTING THAT  
CLASS OF ACCIDENT.



***SEE HANDOUT***

***#19 - ACCIDENT REPORTING  
DECISION***

***FLOW CHART -***

***MILITARY ACCIDENTS***

***AND THE BLANK***

***RECORD OF MINOR INJURY FORM***



## PART VI

### DA FORM

### 285-AB

### SPECIFIC

### INSTRUCTIONS

*GO TO THE BLANK DA FORM*

*285-AB IN YOUR PACKET*



**COMPLETE THE REPORT FOR THE PERSON  
MOST RESPONSIBLE FOR THE ACCIDENT  
OR MOST INVOLVED IN THE ACCIDENT.**

**IF OTHER PERSONS WERE ALSO  
INVOLVED, SEE INSTRUCTIONS IN AGAR  
BOOKLET.**





MANSCEN SAFETY

OFFICE **REPORTING CLASS**

**AND**

## **SOME AREAS THAT CAUSE CONFUSION**

**BLOCK 1, TIME AND DATE OF ACCIDENT - WHEN THE ACCIDENT OCCURRED**

**BLOCK 2, PERIOD OF DAY - FOR DEFINITIONS, SEE AGAR BOOKLET.**

**BLOCK 3, ACCIDENT CLASS - GIVE YOUR ESTIMATE AT THE TIME OF COMPLETION OF THE REPORT. USE A, B, C, OR D. IF THE ACCIDENT IS UNCLASSIFIED, THE DA FORM 285-AB IS NOT REQUIRED.**



MANSCEN SAFETY

AND

**REPORTING CLASS**

**BLOCK 5, UNIT IDENTIFICATION - IN 5A, GIVE UNIT IDENTIFICATION CODE. IN 5B, GIVE NAME OF UNIT, INCLUDING BRIGADE.**

***C-522D BN-9TH ENGR BDE***

**IN 5C, GIVE THE BRANCH OF THE PERSON THE REPORT IS ABOUT. USE THE APPROPRIATE ABBREVIATION FROM THE LIST IN THE AGAR BOOKLET. EXAMPLES:**

***IN FOR INFANTRY, MP FOR MILITARY POLICE, CM FOR CHEMICAL***

**IN 5D, GIVE THE MACOM OF THE PERSON'S UNIT. EXAMPLES: *TRADOC, FORSCOM, MEDCOM***

# ACCIDENT INVESTIGATION

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AND

OFFICE **REPORTING CLASS**

**BLOCK 6, LOCATION OF ACCIDENT - IN 6A, GIVE A BRIEF BUT PRECISE DESCRIPTION OF WHERE THE ACCIDENT OCCURRED. EXAMPLES:**

***SKYSCRAPER OBSTACLE, TA 97, CONFIDENCE COURSE***

***CORNER OF IOWA AND NEBRASKA AVENUES, FLW***

**IN 6B, USE THE CODE FROM THE LIST IN THE AGAR BOOKLET THAT BEST DESCRIBES THE TYPE OF LOCATION THIS IS. EXAMPLES:**

***B4 = PARKING LOT    F2 = WOODED TERRAINE***

***I1 = INDOOR FACILITIES (GYMS, SWIMMING POOLS, ETC.)***



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AND

OFFICE **REPORTING CLASS**

**IN 6C, GIVE THE NAME OF THE STATE OR COUNTRY IN WHICH THE ACCIDENT OCCURRED**

**IN 6D, INDICATE WHETHER THIS WAS ON POST OR OFF POST. IF THE ACCIDENT OCCURRED ON POST, GIVE THE NAME OF THE INSTALLATION ON WHICH IT OCCURRED. EXAMPLES:**

***FORT LEONARD WOOD, MO***

***FORT IRWIN, CA***

**IF THE ACCIDENT OCCURRED OFF POST, THERE IS NO NEED TO NAME AN INSTALLATION HERE. JUST WRITE OR TYPE N/A IN THIS BLANK.**



MANSCEN SAFETY

OFFICE **REPORTING CLASS**

**AND**

**BLOCK 7, EXPLOSIVES/AMMO - INDICATE WHETHER OR NOT AMMUNITION OR EXPLOSIVES WERE PRESENT, AND WHETHER OR NOT THEY WERE INVOLVED**

**BLOCK 8, MISSION - IN 8A, BRIEFLY DESCRIBE THE MISSION THE PERSON OR UNIT WAS PERFORMING WHEN THE ACCIDENT OCCURRED. EXAMPLES:**

***NEGOTIATING CONFIDENCE COURSE***

***PLAYING BASKETBALL***

***CHANGING TIRE ON 5-TON TRUCK***

**NOTICE THAT THIS BLOCK IS USED TO DESCRIBE THE OVERALL MISSION, NOT THE INDIVIDUAL TASK BEING PERFORMED. THAT TASK WILL BE DESCRIBED IN BLOCK**



MANSCEN SAFETY

AND

OFFICE **REPORTING CLASS**

**IN 8B, INDICATE WHETHER OR NOT THIS WAS A METL TASK**

**BLOCK 9, VEHICLE/EQUIPMENT/MATERIEL INVOLVED - LIST ANY SUCH ITEM HERE IS ANY ONE OF THESE THREE IS TRUE OF IT:**

- IT WAS DAMAGED IN THE ACCIDENT**
- ITS USE OF MISUSE CONTRIBUTED TO THE ACCIDENT**
- ITS MATERIEL FAILED OR MALFUNCTIONED, CAUSING OR CONTRIBUTING TO THE ACCIDENT**

**INCLUDE BOTH ARMY AND NON-ARMY EQUIPMENT/ MATERIEL.**





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OFFICE **REPORTING CLASS**

**AND**

**IF THERE IS MORE THAN ONE SUCH ITEM INVOLVED, LIST ONE ITEM FOR EACH LINE.**

**COMPLETE THE INFORMATION INDICATED FOR EACH ITEM YOU LIST.**

**SEE THE AGAR BOOKLET FOR ADDITIONAL INSTRUCTIONS ON THESE BLOCKS.**

**BLOCK 10, WHY DID THE MATERIEL FAIL/MALFUNCTION? - INDICATE THE ROOT CAUSE FOR THE FAILURE, UNDER ONE OF THE HEADINGS LISTED:**

**LEADER**

**STDS/PROCEDURES**

**SUPPORT**





MANSCEN SAFETY

OFFICE **REPORTING CLASS**

**AND**

**IN 10B, DESCRIBE HOW THE MATERIEL FAILED OR MALFUNCTIONED AND EXPLAIN THE ROOT CAUSE INVOLVED. EXAMPLE:**

***MATERIEL MALFUNCTIONED DUE TO IMPROPER DESIGN, WHICH ALLOWED OVERHEATING.***

**BLOCK 13, PERSONNEL CLASSIFICATION - USE THE CODE FROM THE AGAR BOOKLET THAT DESCRIBES THE CLASSIFICATION OF THE PERSON THE REPORT IS ABOUT.**

**EXAMPLES: *a = ACTIVE ARMY    p = USAR ADT***

**BLOCK 20, MOST SEVERE INJURY - USE THE CODES FROM THE AGAR BOOKLET TO DESCRIBE THE WORST INJURY SUSTAINED BY THE PERSON**



MANSCEN SAFETY

OFFICE **REPORTING CLASS**

**AND**

**IN 20A, INDICATE THE DEGREE OF SEVERITY OF THE INJURY. EXAMPLES:**

***a = FATAL    d = DAYS AWAY FROM WORK  
(MISSED WORK DAYS)***

**NOTE: IF THE PERSON'S INJURY RESULTED IN ONLY e = RESTRICTED WORK ACTIVITY, f= FIRST AID ONLY, OR g = NO INJURY, YOU ARE NOT REQUIRED TO COMPLETE THE DA FORM 285-AB.**

**IN 20B, INDICATE THE TYPE OF THE INJURY. EXAMPLES:**

***f = FRACTURES    j = SPRAIN/STRAIN    h = ABRASIONS***

**IN 20C, INDICATE THE BODY PART INJURED.**



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OFFICE **REPORTING CLASS**

**AND**

**IN 20D, INDICATE THE CAUSE OF THE INJURY.  
USE THE CODE THAT BEST DESCRIBES THE  
CAUSE. EXAMPLES:**

***a = STRUCK AGAINST      c = FELL FROM  
ELEVATION***

***h = OVEREXERTION***

**BLOCKS 21 AND 22, DAYS HOSPITALIZED and  
WORKDAYS Lost/Restricted -**

**- IF NECESSARY, ASK THE PHYSICIAN FOR  
ESTIMATES AND USE THOSE NUMBERS IN THESE  
BLOCKS.**



MANSCEN SAFETY

OFFICE **REPORTING CLASS**

**BLOCKS 21 AND 22 -**

**AND**

- **“DAYS HOSPITALIZED” IS DAYS ADMITTED TO THE HOSPITAL AS AN INPATIENT**
- **“WORKDAYS” IS OTHER DAYS MISSED FROM WORK, NOT INCLUDING THE DAYS HOSPITALIZED. THESE ARE DAYS ON BED REST OR QUARTERS OR OTHERWISE AWAY FROM WORK BUT NOT HOSPITALIZED. DO NOT INCLUDE THE DAY OF THE INJURY.**
- **“RESTRICTED DAYS” IS DAYS THE PERSON WILL BE UNABLE TO PERFORM ALL OF HIS REGULAR DUTIES AFTER RETURNING TO WORK (LIGHT DUTY OR PROFILE).**



## EXAMPLE:

**SGT SMITH IS INJURED MONDAY MORNING, 10 MINUTES AFTER ARRIVING AT WORK.**

**HE IS HOSPITALIZED THE REMAINDER OF MONDAY AND ALL DAY TUESDAY, THEN RELEASED WEDNESDAY MORNING AND PLACED ON BED REST.**

**HE IS ON BED REST WEDNESDAY THROUGH FRIDAY.**

**SATURDAY AND SUNDAY ARE HIS NORMAL DAYS OFF.**

**HE RETURNS TO WORK THE FOLLOWING MONDAY BUT IS ON LIGHT DUTY FOR 3 DAYS**

# ACCIDENT INVESTIGATION



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MANSCEN SAFETY

OFFICE REPORTING CLASS

MON - INJURED, HOSPITALIZED

AND

2 HOSPITAL

TUES - IN HOSPITAL

WED - RELEASED FROM HOSPITAL. ON BED REST. **DAYS**

3

THURS - BED REST

WORKDAYS

FRI - BED REST

MISSED

SAT - OFF DAY

SUN - OFF DAY

MON - RETURNS TO WORK, LIGHT DUTY.

3

TUES - LIGHT DUTY

RESTRICTED

WED - LIGHT DUTY

DAYS

THURS - NORMAL WORK



MANSCEN SAFETY

OFFICE **REPORTING CLASS**

**AND**

**BLOCK 23, CODE - USE THE CODE FROM THE AGAR BOOKLET THAT DESCRIBES THE ACTIVITY OF THE PERSON AT THE TIME OF THE ACCIDENT. EXAMPLES:**

*a = SOLDIERING    k = EDUCATIONAL    bb = PASSENGER*

**BLOCK 24, SPECIFIC DESCRIPTION OF ACTIVITY/TASK - NOW, BRIEFLY DESCRIBE THAT SPECIFIC ACTIVITY OR TASK. EXAMPLES:**

*NEGOTIATING SKYSCRAPER OBSTACLE*

*REBOUNDED THE BASKETBALL*

*TIGHTENING THE LUG NUTS ON THE WHEEL*





MANSCEN SAFETY

AND

REPORTING CLASS

**BLOCK 25, PERSONAL PROTECTIVE EQUIP - THIS IS USED TO INDICATE WHETHER OR NOT ANY PPE WAS REQUIRED FOR THE ACTIVITY/TASK BEING PERFORMED BY THE PERSON.**

**IN 25A, CHECK "YES" OR "NO," TO INDICATE THAT AT LEAST ONE ITEM OF PPE WAS REQUIRED.**

**IN 25B, USE THE CODE FROM THE AGAR BOOKLET TO INDICATE WHAT TYPE OF PPE WAS REQUIRED. IF 2 TYPES WERE REQUIRED, GIVE 2 CODES. EXAMPLES:**

***a = SEATBELT    d = GLOVES    e = EARPLUGS***

**IF YOU INDICATE f (OTHER), SPECIFY THE TYPE OF PPE REQUIRED.**

**IN 25C, FOR EACH ITEM INDICATED IN 25B, INDICATE WHETHER OR NOT THE ITEM REQUIRED WAS AVAILABLE FOR THE PERSON. USE "YES" OR "NO."**

**IN 25D, INDICATE WHETHER OR NOT EACH ITEM**



# ACCIDENT INVESTIGATION

MANSCENFLW



AND

MANSCEN SAFETY

REPORTING CLASS

**BLOCK 26, ALCOHOL/DRUGS - INDICATE WHETHER OR NOT ALCOHOL OR DRUGS CAUSED THE ACCIDENT OR AT LEAST CONTRIBUTED TO IT. YOU SHOULD CONSIDER PRESCRIPTION AND NONPRESCRIPTION LEGAL DRUGS, AS WELL AS ILLEGAL SUBSTANCES.**

**BLOCK 27, EQUIP ASSOCIATED WITH - IF YOU LISTED ANY ITEMS OF EQUIPMENT IN BLOCK 9, GIVE THE NUMBER HERE OF THE ITEM THIS PERSON WAS OPERATING OR OTHERWISE ASSOCIATED WITH. USE THE NUMBER UNDER COLUMN 9a.      #1      #2**

**BLOCK 28, LICENSED TO OPERATE EQUIP - MARK "YES" OR "NO," TO INDICATE WHETHER OR NOT THE PERSON IN BLOCK 11 WAS LICENSED TO OPERATE THE EQUIPMENT IN BLOCK 27. IF NO EQUIPMENT WAS BEING OPERATED OR NO LICENSE WAS REQUIRED, SKIP THIS BLOCK OR WRITE "N/A" IN IT.**

**BLOCK 29, HRS ON DUTY - INDICATE THE NUMBER OF**



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**BLOCK 30, HRS SLEEP - THIS SHOULD BE THE TOTAL NUMBER OF HOURS THE PERSON HAD DURING THE 24 HOURS PRIOR TO THE ACCIDENT. EXAMPLE:**

**PVT JONES AWOKES AT 0500 ON MONDAY. HE WORKED ALL DAY MONDAY, WENT HOME, SLEPT FROM 0900 UNTIL 0500 (8 HOURS), AND RETURNED TO WORK TUESDAY MORNING. HE TOOK A 1-HOUR NAP DURING HIS LUNCH PERIOD TUESDAY. HE RETURNED TO WORK THAT AFTERNOON AND WAS INJURED AT 1600.**

**COUNT BACK OVER THE PREVIOUS 24 HOURS, FROM 1600 MONDAY, THROUGH 1600 TUESDAY. HE HAD SLEPT 8 HOURS AND THEN THE 1-HOUR NAP A TOTAL OF 9 HOURS**



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**AND**

**BLOCKS 31 AND 34, TACTICAL TRAINING and FTX - FOR THESE TWO BLOCKS, USE THE DEFINITIONS IN THE AGAR BOOKLET. SIMPLY INDICATE YES OR NO FOR EACH BLOCK, AND, IF YOU MARK "YES" ON 34, GIVE THE NAME OF THE FTX.**

**BLOCK 32, TYPE TRAINING FACILITY - IF THE PERSON WAS PARTICIPATING IN ANY TYPE OF TRAINING, GIVE THE PROPER CODE, FROM THE AGAR BOOKLET, THAT DESCRIBES THE TYPE OF FACILITY BEING USED.  
EXAMPLES:**

***a = GARRISON    e = JRTC    g = STANDARD RANGE  
FACILITY/LIVE FIRE***

**BLOCK 33, LAST TRAINING - FOR THE ACTIVITY SPECIFIED IN BLOCKS 23 AND 24, TELL HOW MANY MONTHS SINCE THE LAST TIME THIS PERSON HAD RECEIVED TRAINING BEFORE THE ACCIDENT.**

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**AND**

**BLOCK 36, MISTAKE - HERE, YOU SHOULD GIVE YOUR OPINION AS TO WHETHER OR NOT THE PERSON MADE A MISTAKE THAT CAUSED OR CONTRIBUTED TO THE ACCIDENT.**

**KEEP IN MIND THAT SAYING THE PERSON MADE A MISTAKE IS NOT THE SAME AS BLAMING THE PERSON. IN EACH OF THE FOLLOWING EXAMPLES, THE PERSON INVOLVED MADE A MISTAKE THAT CAUSED OR CONTRIBUTED TO THE ACCIDENT:**

***SGT SMITH JUMPED TO REBOUND THE BALL AND CAME DOWN ON ANOTHER PLAYER'S FOOT, TWISTING HIS ANKLE. (HIS MISTAKE WAS THAT HE FAILED TO MAINTAIN PROPER BODY POSITION)***

***PVT ANDREWS LOST HER GRIP ON AN OBSTACLE ON THE CONFIDENCE COURSE AND FELL, SPRAINING HER ANKLE. (HER MISTAKE WAS THAT SHE FAILED TO FIRMLY GRAB THE EQUIPMENT)***



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**IN 36A, INDICATE WHETHER OR NOT A MISTAKE WAS MADE.**

**IN 36B, USE THE CODE FROM THE AGAR BOOKLET THAT INDICATES THE MISTAKE MADE.**

**IN 36C, DESCRIBE THE MISTAKE AND ALSO HOW IT CAUSED OR CONTRIBUTED TO THE ACCIDENT. EXAMPLE:**

***SSG WASHINGTON BACKED THE 5-TON INTO A LIGHT POLE. BECAUSE HE FAILED TO USE A GROUND GUIDE, HE WAS UNAWARE OF HOW CLOSE HE WAS TO THE POLE.***





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**BLOCK 37, WHY WAS THE MISTAKE MADE (ROOT CAUSE) -**

**SELECT THE ROOT CAUSE(S) THAT RESULTED IN THE MISTAKE WHICH CAUSED OR CONTRIBUTED TO THE ACCIDENT. FIRST, SELECT FROM THE 5 HEADINGS IN 37A, USING THE DESCRIPTION IMMEDIATELY UNDER EACH HEADING AS A GUIDE.**

**IN 37B, DESCRIBE THE ROOT CAUSE(S) YOU MARKED AND EXPLAIN HOW IT (OR THEY) CAUSED THE MISTAKE (FROM BLOCK 36). EXAMPLE:**

***AT 0600, SPC WILLIAMS LOST CONTROL OF HER POV, AND IT LEFT THE ROAD AND OVERTURNED. THIS OCCURRED BECAUSE SHE FELL ASLEEP WHILE DRIVING. SHE HAD BEEN UP LATE THE PREVIOUS NIGHT, VISITING WITH FRIENDS. THE MISTAKE WAS THAT SHE LOST CONTROL OF THE VEHICLE. THE ROOT CAUSE WAS "FATIGUE," UNDER "INDIVIDUAL."***



**BLOCK 38, ENVIRONMENTAL CONDITIONS -  
FIRST, DETERMINE WHAT THE ENVIRONMENTAL  
CONDITIONS WERE AT THE TIME OF THE  
ACCIDENT. USE THE CODES IN THE AGAR  
BOOKLET.**

**THEN, INDICATE WHETHER EACH CAUSED OR  
CONTRIBUTED TO THE ACCIDENT. CHECK "YES,"  
"NO," OR "UNK" (UNKNOWN) FOR EACH  
CONDITION. EXAMPLE:**

***PRESENT:  
CAUSED/CONTRIBUTED?***

***A (CLEAR/DRY)  
NO***



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**BLOCK 39, SYNOPSIS - DESCRIBE THE SEQUENCE OF EVENTS THAT RESULTED IN THE ACCIDENT. INCLUDE ANY EVENTS THAT OCCURRED PRIOR TO THE ACCIDENT THAT HAVE A DIRECT BEARING ON HOW IT OCCURRED. INCLUDE THE SEQUENCE OF EVENTS INVOLVED IN THE ACCIDENT ITSELF. AND INCLUDE ANY POST-ACCIDENT EVENTS THAT HAVE A DIRECT BEARING UPON THE CAUSE OF THE ACCIDENT OR THAT DEMONSTRATE THE EFFECTIVENESS OF EMERGENCY NOTIFICATION AND RESPONSE PROCEDURES/ACTIONS.**

**TELL HOW AND WHY THE ACCIDENT OCCURRED.**

**BLOCK 40, CORRECTIVE ACTIONS - DESCRIBE THE ACTIONS TAKEN, PLANNED, OR RECOMMENDED TO ELIMINATE OR REDUCE THE ROOT CAUSE OF THE ACCIDENT.**

**THESE ACTIONS SHOULD BE FOCUSED PRIMARILY ON THE ROOT CAUSES (FROM BLOCK 37 AND/OR BLOCK 10) NOT**



- THESE SHOULD BE LOGICAL, FEASIBLE, EFFECTIVE, TARGETED TOWARD ROOT CAUSES, AND DIRECTED TO THE PROPER LEVEL OF COMMAND

- KEEP IN MIND THAT TRAINING IS USUALLY NOT AN EFFECTIVE COUNTERMEASURE FOR A PERSON WHO HAS BEEN TRAINED PREVIOUSLY

**BLOCK 41, POC - THIS WILL USUALLY INFORMATION ABOUT YOU, THE PERSON WHO COMPLETES THE REPORT.**

**BLOCK 42, COMMAND REVIEW - BE SURE THE REPORT IS REVIEWED AT EACH LEVEL OF THE CHAIN OF COMMAND**



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THE COMPANY COMMANDER WILL USUALLY BE THE  
LOWEST LEVEL AND SHOULD SIGN IN BLOCK 42.

TYPE OR PRINT THE SIGNATURE BLOCKS FOR THE  
BATTALION COMMANDER AND BRIGADE COMMANDER IN  
THE BLANK AREA AT THE BOTTOM OF SIDE TWO OF THE  
FORM, AND THESE TWO SHOULD SIGN THERE.

41. POINT OF CONTACT FOR INFORMATION ON THE ACCIDENT			
a. Name (Last, First, MI)		e. Telephone# DSN:	
		COM:	
42. COMMAND REVIEW	a. Name	c. Rank	43. SAFETY OFFICE REVIEW
	b. Signature	d. Date	
		a. Name	b. Date

LTC PHILLIP H. SMITH  
CDR, 7-10 INF BN

D

COL WILLIAM W. WILLIAMS  
CDR, 9TH TNG BDE



**BLOCK 43 - FOR THE MANSCEN SAFETY OFFICE.**

**MAKE SURE THE REPORT IS PROPERLY AND COMPLETELY FILLED OUT, REVIEWED AT ALL LEVELS, AND FORWARDED TO MSO WITHIN 10 WORK DAYS OF THE DAY OF THE ACCIDENT.**

**SEND THE ORIGINAL TO MSO. KEEP A COPY AT EACH LEVEL OF THE CHAIN OF COMMAND.**



**DO YOU HAVE ANY QUESTIONS?**



**THIS CONCLUDES THE ACCIDENT  
INVESTIGATION AND REPORTING PORTION OF  
THE SAFETY OFFICER COURSE. THE NEXT CLASS  
WILL START AT 1300 AND WILL BE ON  
ERGONOMICS.**